

|                                                                                                                                                        |            |                                                                                                                                                   |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 165676</b>                                                                                                                                    |            | <b>Due no later than Apr 30, 2017</b>                                                                                                             |       | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |            | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>3 PEAKS FINANCIAL, LLC<br>SHANE HILL<br>2677 E 17TH ST STE 100<br>AMMON ID 83406 |       | SHANE HILL<br>2721 BUNGALOW DR<br>AMMON ID 83401   |         |             |  |
|                                                                                                                                                        |            |                                                                                                                                                   |       | 3. <u>New</u> Registered Agent Signature:*         |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |            |                                                                                                                                                   |       |                                                    |         |             |  |
| Office Held                                                                                                                                            | Name       | Street or PO Address                                                                                                                              | City  | State                                              | Country | Postal Code |  |
| MEMBER                                                                                                                                                 | SHANE HILL | 2721 BUNGALOW DR                                                                                                                                  | AMMON | ID                                                 | USA     | 83401       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 165676</b>                                                                                          |            | 6. Annual Report must be signed.*<br>Signature: Shane Hill<br>Name (type or print): Shane Hill<br>Date: 02/23/2017<br>Title: Owner                |       |                                                    |         |             |  |
| Processed 02/23/2017                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                         |       |                                                    |         |             |  |