

|                                                                                                                                                        |                |                                                                                                                     |      |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 185924</b>                                                                                                                                    |                | <b>Due no later than Jul 31, 2018</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>LOWE VALLEY LLC<br>PO BOX 445<br>MERIDIAN ID 83680 |      | JAMES A LOWE<br>55 SW 5TH AVE STE 100<br>MERIDIAN ID 83642 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                     |      | 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                                                                                                                                                 | HILLARY S LOWE | 1820 N FIREBRICK DR                                                                                                 | KUNA | ID                                                         | USA     | 83634       |  |
| MEMBER                                                                                                                                                 | JAMES A LOWE   | 1820 N FIREBRICK DR                                                                                                 | KUNA | ID                                                         | USA     | 83634       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 185924</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: James A Lowe<br>Name (type or print): James A Lowe                  |      |                                                            |         |             |  |
| Date: 05/24/2018<br>Title: Member                                                                                                                      |                |                                                                                                                     |      |                                                            |         |             |  |
| Processed 05/24/2018                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                           |      |                                                            |         |             |  |