| No. <b>W 141796</b>  |                 | Due no later than Sep 30, 2016  |                                   | 2. I | 2. Registered Agent and Address (NO PO BOX)   |       |         |             |
|--|-----------------|---|-----------------------------------|------|---|-------|---------|-------------|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080            |                 | Annual Report Form  1. Mailing Address: Correct in this box if needed.  SYMBOLS, LLC NARDA PITKETHLY PO BOX 6049 KETCHUM ID 83340 |                                   | d.   | BARDLEE R FRAZER 877 W MAIN ST STE 1000 BOISE ID 83702  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar               |                 | mes and Addresses o   | of at least one Member or Manager |      |   |       |         |             |
| Office Held  | Name            | mes and Addresses e   | Street or PO Address              | Ci   | ity   | State | Country | Postal Code |
| MANAGER  | NARDA PITKETHLY |   | P.O. BOX 6049                     | H    | AILEY   | ID    | USA     | 83333       |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.* Signature: Shirley Spinelli   |                                   |      | Date: 10/18/2016  |       |         |             |
| W 141796   |                 | Name (type or print): Shirley Spinelli  |                                   |      | Title: Bookkeeper   |       |         |             |
| Processed 10/18/2016 * Electronically provided signatures are accepted as original signatures. |                 |   |                                   |      |   |       |         |             |