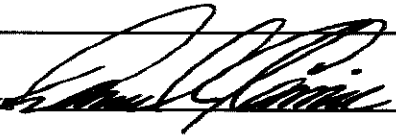


|                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |                                                                                        |                                                      |                    |             |                               |             |              |            |                                                                              |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------------------------------------|------------------------------------------------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|------------------------------------------------------------------------------|--|--|--|--|
| <b>No.</b> <b>W 7394</b>                                                                                                                                             | <b>Annual Report Form</b><br><i>Due No Later Than November 30,</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                               | <b>1999</b>                                                                            | <b>2. Registered Agent and Office NOT A P.O. BOX</b> |                    |             |                               |             |              |            |                                                                              |  |  |  |  |
| <b>Return to:</b><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>** FINAL NOTICE **</b> | <b>1. Mailing Address - Please Correct. If Not Correct</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                               | <b>DANIEL J CAMIE</b><br><b>5669 FIELDCREST DR</b><br><br><b>BOISE</b> <b>ID 83704</b> |                                                      |                    |             |                               |             |              |            |                                                                              |  |  |  |  |
|                                                                                                                                                                      | <b>ALLIANCE GROUP OF IDAHO, LLC</b><br><b>DANIEL J CAMIE</b><br><b>5669 FIELDCREST DR</b><br><br><b>BOISE</b> <b>ID 83704</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               | <b>3. Organized Under the Laws of:</b><br><br><b>ID</b> <b>W 7394</b>                  |                                                      |                    |             |                               |             |              |            |                                                                              |  |  |  |  |
|                                                                                                                                                                      | <b>4. Corporations: Enter Names and Business Addresses of <u>President, Secretary and Directors</u></b><br><b>Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u>Office held</u></td> <td style="text-align: center;"><u>Name</u></td> <td style="text-align: center;"><u>Street or P.O. Address</u></td> <td style="text-align: center;"><u>City</u></td> <td style="text-align: center;"><u>State</u></td> <td style="text-align: center;"><u>Zip</u></td> </tr> <tr> <td colspan="6"> <b>Initial Manager Daniel J. Camie, 5669 Fieldcrest Dr., Boise, ID 83704</b> </td> </tr> </table> |                               |                                                                                        |                                                      | <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | <b>Initial Manager Daniel J. Camie, 5669 Fieldcrest Dr., Boise, ID 83704</b> |  |  |  |  |
| <u>Office held</u>                                                                                                                                                   | <u>Name</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <u>Street or P.O. Address</u> | <u>City</u>                                                                            | <u>State</u>                                         | <u>Zip</u>         |             |                               |             |              |            |                                                                              |  |  |  |  |
| <b>Initial Manager Daniel J. Camie, 5669 Fieldcrest Dr., Boise, ID 83704</b>                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |                                                                                        |                                                      |                    |             |                               |             |              |            |                                                                              |  |  |  |  |
| <b>5. <u>New</u> Registered Agent Signature</b>                                                                                                                      | <b>6.</b><br><div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>Signature</b> <br/> <b>Name</b> (Typed or Printed) <b>Daniel J. Camie</b> </div> <div style="width: 35%;"> <b>Date</b> <b>1/10/00</b><br/> <b>Initial</b><br/> <b>Title</b> <b>Manager</b> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                        |                                                      |                    |             |                               |             |              |            |                                                                              |  |  |  |  |

ISSUED: 10-02-1999

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