

|  |               |   |         |  |                     |
|--|---------------|---|---------|--|---------------------|
| No. <b>W 61039</b>   |               | <b>Due no later than Mar 31, 2016</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>POTTS & ASSOCIATES, LLC<br>JIMMY R POTTS<br>1844 S 3000 W<br>REXBURG ID 83440 |         | JIMMY R POTTS<br>1844 S 3000 W<br>REXBURG ID 83440 |                     |
|  |               |   |         | 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 |
| MANAGER  | JIMMY R POTTS | 1844 S 3000 W   | REXBURG | ID   | 83440               |
| 5. Organized Under the Laws of:<br><br><b>CO<br/>W 61039</b>   |               | 6. Annual Report must be signed.*<br>Signature: Jimmy R Potts<br>Name (type or print): Jimmy R Potts<br>Date: 03/22/2016<br>Title: Manager                                      |         |  |                     |
| Processed 03/22/2016   |               | * Electronically provided signatures are accepted as original signatures.   |         |  |                     |