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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------|---------|-----------------------|--|
| No. <b>C 193635</b>                                                                                                                                    |                  | <b>Due no later than Feb 28, 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>J.W. ROYLANCE CONSTRUCTION, INC.<br>THOMAS J HOLMES<br>PO BOX 967<br>POCATELLO ID 83204 |           | THOMAS J HOLMES<br>203 S GARFIELD<br>POCATELLO ID 83204 |         |                       |  |
|                                                                                                                                                        |                  |                                                                                                                                                      |           | 3. <u>New</u> Registered Agent Signature:*              |         |                       |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                  |                                                                                                                                                      |           |                                                         |         |                       |  |
| Office Held                                                                                                                                            | Name             | Street or PO Address                                                                                                                                 | City      | State                                                   | Country | Postal Code           |  |
| PRESIDENT                                                                                                                                              | JASON W ROYLANCE | PO BOX 967                                                                                                                                           | POCATELLO | ID                                                      | USA     | 83204                 |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                    |           |                                                         |         |                       |  |
| <b>ID<br/>C 193635</b>                                                                                                                                 |                  | Signature: Thomas J. Holmes                                                                                                                          |           |                                                         |         | Date: 12/22/2017      |  |
|                                                                                                                                                        |                  | Name (type or print): Thomas J. Holmes                                                                                                               |           |                                                         |         | Title: Agent/Attorney |  |
| Processed 12/22/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                            |           |                                                         |         |                       |  |