




No. W 93824		Due no later than Jun 30, 2018		2. Registered Agent and Office (NOT A P.O. BOX)																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BALLANTYNE-STIBUREK LLC BARTON H BALLANTYNE 7824 W THUNDER MOUNTAIN DR BOISE ID 83709		BARTON H BALANTYNE 7824 W THUNDER MOUNTAIN DR BOISE ID 83709																																				
NO FILING FEE IF RECEIVED BY-DUE DATE				3. <u>New</u> Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																								
<table border="1"><thead><tr><th>Manager or Member</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>BARTON H. Ballantyne</td><td>7824 W. Thunder Mountain Dr.</td><td>BOISE, ID</td><td>83709</td><td></td><td></td></tr><tr><td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Leslie M. Stiburek</td><td>P.O. BOX 275</td><td>Eagle, ID</td><td>83616</td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BARTON H. Ballantyne	7824 W. Thunder Mountain Dr.	BOISE, ID	83709			Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Leslie M. Stiburek	P.O. BOX 275	Eagle, ID	83616			Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																		
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BARTON H. Ballantyne	7824 W. Thunder Mountain Dr.	BOISE, ID	83709																																				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Leslie M. Stiburek	P.O. BOX 275	Eagle, ID	83616																																				
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
5. Organized Under the Laws of: IDAHO W 93824		6. <table border="1"><tr><td>Signature: </td><td>Date: 4/23/18</td></tr><tr><td>Name (type or print): BARTON H. Ballantyne</td><td>Title: MANAGING PARTNER</td></tr></table>				Signature: 	Date: 4/23/18	Name (type or print): BARTON H. Ballantyne	Title: MANAGING PARTNER																															
Signature: 	Date: 4/23/18																																							
Name (type or print): BARTON H. Ballantyne	Title: MANAGING PARTNER																																							
Issued 04/23/2018 by TLB		100859																																						