| No. <b>W 136909</b>  |      | Due no later than Apr 30, 2018   |                             | 2 | 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.  DIRECT PROPANE LLC DIRECT PROPANE 8319 CLARK RD MARSING ID 83639 |                             |   | KIM WOLFLEY 8319 CL;ARK RD MARSING ID 83639-8363  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar               |      | mes and Addresses of at  | least one Member or Manager |   |   |       |         |             |
| Office Held  | Name | nies and Addresses of at   | Street or PO Address        |   | City  | State | Country | Postal Code |
| MANAGER CAROL LOVELAND   |      | ELAND  | 8051 ISLAND VIEW DR         |   | MARSING   | ID    | USA     | 83676       |
| 5. Organized Under the Laws of:  ID  W 136909  |      | 6. Annual Report must be signed.* Signature: Carol Loveland Name (type or print): Carol Loveland   |                             |   | Date: 02/27/2018<br>Title: member   |       |         |             |
| Processed 02/27/2018 * Electronically provided signatures are accepted as original signatures. |      |  |                             |   |   |       |         |             |