| No. W 69659 | | Due no later than Dec 31, 2016 | | 2. Registered A | 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. BDH, LLC TRAVIS J MICHAELSON PO BOX 45 MENAN ID 83434-0045 | | 309 N 4300 | TRAVIS J MICHAELSON 309 N 4300 E RIGBY ID 83442 3. New Registered Agent Signature:* | | | |
| | | | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compar | nies: Enter Nai | mes and Addresses | of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | TRAVIS J M | 1ICHAELSON | PO BOX 45 | MENAN | ID | USA | 83434-0045 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 69659 | | Signature: Travis J. Michaelson | | | Date: | Date: 12/02/2016 | | |
| | | Name (type or | print): Travis J. Michaelson | | Title: Member | | | |
| Processed 12/02/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |