

|  |               |   |       |   |         |             |  |
|--|---------------|---|-------|---|---------|-------------|--|
| No. <b>C 145736</b>  |               | <b>Due no later than Oct 31, 2015</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>SERVICIOS LATINOAMERICANOS, INCORPORATED<br>DAMARIS KELLOGG<br>524 3RD STREET SOUTH<br>NAMPA ID 83651<br>USA |       | DAMARIS KELLOGG<br>524 3RD STREET SOUTH<br>NAMPA ID 83651 |         |             |  |
|  |               |   |       | 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 |  |
| VICE PRESIDENT   | ROGER KELLOGG | 524 3RD STREET SOUTH  | NAMPA | ID  | USA     | 83651       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 145736</b>  |               | 6. Annual Report must be signed.*<br>Signature: Roger Kellogg<br>Name (type or print): Roger Kellogg<br>Date: 08/26/2015<br>Title: Vice President                         |       |   |         |             |  |
| Processed 08/26/2015   |               | * Electronically provided signatures are accepted as original signatures.   |       |   |         |             |  |