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|--|---------------------|--|-------|---|---------|-------------|--|
| No. W 145062 | | Due no later than Dec 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. SOWARDS LIVING TRUST #3, LLC NORMAN K SOWARDS 3212 W 3000 N MOORE ID 83255 | | NORMAN K SOWARDS 3212 W 3000 N MOORE ID 83255 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature: * | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | NORMAN KENT SOWARDS | 3212 W, 3000 N | MOORE | ID | USA | 83255 | |
| 5. Organized Under the Laws of: ID W 145062 | | 6. Annual Report must be signed.* Signature: NORMAN K SOWARDS Name (type or print): NORMAN K SOWARDS Date: 10/28/2016 Title: OWNER | | | | | |
| Processed 10/28/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |