

|                                                                                                                                                        |                |                                                                                                                                           |           |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 144958</b>                                                                                                                                    |                | Due no later than Dec 31, 2015                                                                                                            |           | 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>DWIGHT OLSON LLC<br>DWIGHT E OLSON<br>1204 JESSICA AVE<br>FRUITLAND ID 83619 |           | DWIGHT E OLSON<br>1204 JESSICA AVE<br>FRUITLAND ID 83619-8361 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                           |           | 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                                                                                                                                                 | DWIGHT E OLSON | 1204 JESSICA AVE                                                                                                                          | FRUITLAND | ID                                                            | USA     | 83619       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 144958</b>                                                                                              |                | 6. Annual Report must be signed.*<br>Signature: Dwight E. Olson<br>Name (type or print): Dwight E. Olson                                  |           |                                                               |         |             |  |
| Date: 12/25/2015<br>Title: Member                                                                                                                      |                |                                                                                                                                           |           |                                                               |         |             |  |
| Processed 12/25/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                 |           |                                                               |         |             |  |