No. C 169227		Annual Report Form 1. Mailing Address: Correct in this box if needed. INTERMOUNTAIN TAX SERVICES, INC. LAUREL SCHMIDT 36 N HWY 75		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				LAUREL SCHMIDT 36 N HWY 75 SHOSHONE ID 83352 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		on Addresses of President Corretony	and Directors Transurer (Traceurar (antional)			
200	Name	ss Addresses of President, Secretary, Street or PC	10.00	City	State	Country	Postal Code
SECRETARY	RUSTY PARK LAUREL SCHI	ER 36 N HWY 7	5	SHOSHONE SHOSHONE	ID ID	USA USA	83352 83352
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Laurel Schmidt	Date: 11/18/2016				
C 169227		Name (type or print): Laurel Schm	Title: President				
Processed 11/18/2016 * Electronically provided signatures are accepted as original signatures.							