

|                                                                                                                                                        |                         |                                                                                                                                                            |       |                                                                        |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 153998</b>                                                                                                                                    |                         | <b>Due no later than Jul 31, 2018</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>LMO ENTERPRISES LLC<br>LISA ANN MOTT-OLBERDING<br>6161 S BASALT TRAIL PLACE<br>BOISE ID 83716 |       | LISA ANN MOTT-OLBERDING<br>6161 S BASALT TRAIL PLACE<br>BOISE ID 83716 |         |                  |  |
|                                                                                                                                                        |                         |                                                                                                                                                            |       | 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                                                                                                                                                 | LISA ANN MOTT-OLBERDING | 6161 S. BASALT TRAIL PLACE                                                                                                                                 | BOISE | ID                                                                     | USA     | 83716            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                         | 6. Annual Report must be signed.*                                                                                                                          |       |                                                                        |         |                  |  |
| <b>ID<br/>W 153998</b>                                                                                                                                 |                         | Signature: Lisa Mott-Olberding                                                                                                                             |       |                                                                        |         | Date: 08/02/2018 |  |
|                                                                                                                                                        |                         | Name (type or print): Lisa Mott-Olberding                                                                                                                  |       |                                                                        |         | Title: Member    |  |
| Processed 08/02/2018                                                                                                                                   |                         | * Electronically provided signatures are accepted as original signatures.                                                                                  |       |                                                                        |         |                  |  |