No. C 202935	Due no later than Jul 31, 2017		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			AMANDA BU			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. HALIDON CORPORATION AMANDA BURTENSHAW PO BOX 3472			3695 BROOKFIELD LANE AMMON ID 83406			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
	IDAHO FALLS ID 83403-3472		3.	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	······································						
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
PRESIDENT AMANDA BURTENSHAW 3695 BROOKFIEL		3695 BROOKFIELD LANE	A	NOMMA	ID		83406
5. Organized Under the Laws of:	Organized Under the Laws of: 6. Annual Report must be signed.*						
DE	Signature: Amanda Burtenshaw			Date: 05/20/2017			
C 202935	Name (type or print): Amanda Burtenshaw			Title: President			
Processed 05/20/2017	* Electronically provided signatures are accepted as original signatures.						