| No. W 1179 | | Due no later than May 31, 2018 | | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|--|-----------------------------|---------------------------|--|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. GOLCONDA LIMITED CO. NELSON R HOWARD PO BOX 472 LEWISTON ID 83501 | | 1522 HEMLOO LEWISTON I | NATALIE HOWARD 1522 HEMLOCK AVENUE LEWISTON ID 83501 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compani | ies: Enter Nar | nes and Addresses of at | east one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | NELSON ROBERT HOWARD | | 911 PROSPECT AVENUE | LEWISTON | ID | USA | 83501 | |
| I MANAGER | NATALIE JAI HOWARD) | NE CARGILL(FORMERLY | 1522 HEMLOCK AVE | LEWISTON | ID | USA | 83501 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 1179 | | Signature: NATALIE CARGILL | | | Date: 03/21/2018 | | | |
| | | Name (type or print): | | Title: MANAGER | | | | |
| Processed 03/21/2018 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |