

|                                                                                                                                                        |               |                                                                                |       |                                                    |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------|-------|----------------------------------------------------|------------------|-------------|--|
| No. <b>W 13922</b>                                                                                                                                     |               | <b>Due no later than Dec 31, 2015</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>Annual Report Form</b>                                                      |       | NEILS TIDWELL<br>5855 USTICK RD<br>NAMPA ID 83687  |                  |             |  |
|                                                                                                                                                        |               | <b>1. Mailing Address: Correct in this box if needed.</b>                      |       |                                                    |                  |             |  |
|                                                                                                                                                        |               | SLIMCO COMMUNICATIONS, LLC<br>GINA TIDWELL<br>5855 USTICK RD<br>NAMPA ID 83687 |       | 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                                                                                                                                                 | NEILS TIDWELL | 5855 USTICK RD                                                                 | NAMPA | ID                                                 | USA              | 83687       |  |
| MANAGER                                                                                                                                                | GINA TIDWELL  | 5855 USTICK RD                                                                 | NAMPA | ID                                                 | USA              | 83687       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                              |       |                                                    |                  |             |  |
| <b>ID<br/>W 13922</b>                                                                                                                                  |               | Signature: Gina Tidwell                                                        |       |                                                    | Date: 02/02/2016 |             |  |
|                                                                                                                                                        |               | Name (type or print): Gina Tidwell                                             |       |                                                    | Title: Member    |             |  |
| Processed 02/02/2016                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.      |       |                                                    |                  |             |  |