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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 112171</b>                                                                                                                                    |                   | <b>Due no later than Mar 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>1. Mailing Address: Correct in this box if needed.</b><br><br>CHANDLER LAW GROUP, PLLC<br>JOSHUA K CHANDLER<br>901 PIER VIEW DR SUITE 206<br>IDAHO FALLS ID 83402 |             | JOSHUA K CHANDLER<br>901 PIER VIEW DR SUITE 206<br>IDAHO FALLS 83402 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                                      |             | 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                                                                                                                                                 | JOSHUA K CHANDLER | 901 PIER VIEW DR., SUITE 206                                                                                                                                         | IDAHO FALLS | ID                                                                   | USA     | 83402            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                                                    |             |                                                                      |         |                  |  |
| <b>ID<br/>W 112171</b>                                                                                                                                 |                   | Signature: Joshua K. Chandler                                                                                                                                        |             |                                                                      |         | Date: 01/22/2015 |  |
|                                                                                                                                                        |                   | Name (type or print): Joshua K. Chandler                                                                                                                             |             |                                                                      |         | Title: Member    |  |
| Processed 01/22/2015                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                            |             |                                                                      |         |                  |  |