| No. C 154787 | | Due no later than May 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. MLTN CORP MICHAEL R OLSON PO BOX 492 MCCALL ID 83638 | | 2. | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-------------------------|---|--|--------------|---|----------|------------|----------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | | MICHAEL R OLSON 3227 CANYON CREEK WAY NEW MEADOWS ID 83654 3. New Registered Agent Signature:* | | | |
| NO FILING FE RECEIVED BY DU 4. Corporations: Enter Na | E DATE | ess Addresses of Pr | esident, Secretary, and Directors. Tre | Pasurer (on | tional) | | | |
| Office Held | Name | C33 Addi C33C3 Oi 11 | Street or PO Address | | City | State | Country | Postal Code |
| SECRETARY PRESIDENT | LE ANN OLS MICHAEL R | | PO BOX 492 PO BOX 492 | | CCALL CCALL | ID ID | USA USA | 83638 83638 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 154787 | | Signature: Michael R. Olson | | | Date: 03/22/2018 | | | |
| | | Name (type or print): Michael R. Olson | | | Title: President | | | |
| Processed 03/22/2018 | | * Electronically pro | vided signatures are accepted as origi | inal signatu | ires. | | | |