| No. W 89601 | | Due no later than Jan 31, 2017 | | | 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. WRAP-IT OF IDAHO, LLC SUSAN HENDERSON 1509 CHAFFIN LANE IDAHO FALLS ID 83401 | | JR HENDERSON 1509 CHAFFIN LANE IDAHO FALLS ID 83401 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | | |
| Office Held Na | ime | | Street or PO Address | | City | State | Country | Postal Code |
| | JR HENDERSON SUSAN HENDERON | | 1509 CHAFFIN LANE 1509 CHAFFIN LANE | | IDAHO FALLS IDAHO FALLS | ID ID | USA USA | 83401 83401 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 89601 | | Signature: JR HENDERSON | | | Date: 12/22/2016 | | | |
| | | Name (type or print): JR HENDERSON | | | Title: MEMBER | | | |
| Processed 12/22/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |