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| No. W 121258 | Due no later than Jan 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. BEDZZZZ, LLC PO BOX 5732 TWIN FALLS ID 83303-5732 | | MICHAEL G WALDRON 2330 JULIE LANE TWIN FALLS ID 83301 | | | |
| | | | 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 | MICHAEL WALDRON | 2330 JULIE LANE | TWIN FALLS | ID | USA | 83301 |
| MEMBER | BLAKE BESSIRE | 3704N 2535E | TWIN FALLS | ID | USA | 83301 |
| 5. Organized Under the Laws of: ID W 121258 | 6. Annual Report must be signed.* Signature: Michael Waldron Name (type or print): Michael Waldron | | Date: 11/21/2016 Title: member | | | |
| Processed 11/21/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |