

No. W 146174		Due no later than Jan 31, 2016 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		1. Mailing Address: Correct in this box if needed. BEST APD LLC. SHON GREGERSEN 1265 PARKWAY DR STE B BLACKFOOT ID 83221		SHON GREGERSEN 1265 PARKWAY DR STE B BLACKFOOT ID 83221			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name SHON GREGERSEN	Street or PO Address 1265 PARKWAY DR STE B		City BLACKFOOT	State ID	Country USA	Postal Code 83221
5. Organized Under the Laws of: ID W 146174		6. Annual Report must be signed.* Signature: Shon Gregersen Name (type or print): Shon Gregersen Date: 02/05/2016 Title: CFO					
Processed 02/05/2016 * Electronically provided signatures are accepted as original signatures.							