

|  |  |   |  |       |         |             |
|--|--|---|--|-------|---------|-------------|
| No. <b>W 126011</b>  | <b>Due no later than Jun 30, 2016</b><br><b>Annual Report Form</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>AIR COMFORT HEATING & COOLING, L.L.C.<br>MICHAEL NEWTON<br>1036 INNOVATION WAY SUITE B<br>POST FALLS ID 83854 |   | MICHAEL NEWTON<br>1036 INNOVATION WAY<br>POST FALLS ID 83854 |       |         |             |
|  |  |   | 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 DAMON NEWTON   | 1036 INNOVATION WAY SUITE B   | POST FALLS   | ID    | USA     | 83854       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 126011</b>  | 6. Annual Report must be signed.*<br>Signature: MIKE NEWTON<br>Name (type or print): MIKE NEWTON   |   | Date: 07/26/2016<br>Title: OWNER                             |       |         |             |
| Processed 07/26/2016   |  | * Electronically provided signatures are accepted as original signatures. |  |       |         |             |