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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------|---------------------|
| No. <b>W 48066</b>                                                                                                                                     |                            | <b>Due no later than Mar 31, 2017</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SURF CITY, LLC<br>LANCE CHURCHILL<br>967 E PARKCENTER BLVD #311<br>BOISE ID 83706 |       | ENTITY SERVICES, INC.<br>2309 N MTN VIEW DR<br>STE 180<br>BOISE ID 83708 |                     |
|                                                                                                                                                        |                            |                                                                                                                                                                                     |       | 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 |
| MANAGER                                                                                                                                                | SURF CITY ENTERPRISES, INC | 967 E PARKCENTER BLVD #311                                                                                                                                                          | BOISE | ID                                                                       | 83706               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 48066</b>                                                                                           |                            | 6. Annual Report must be signed.*<br>Signature: Dinorah Basye<br>Name (type or print): Dinorah Basye<br>Date: 02/23/2017<br>Title: Bookkeeper                                       |       |                                                                          |                     |
| Processed 02/23/2017                                                                                                                                   |                            | * Electronically provided signatures are accepted as original signatures.                                                                                                           |       |                                                                          |                     |