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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------|---------------------|
| No. <b>W 47424</b>                                                                                                                                     |                | <b>Due no later than Feb 29, 2016</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>DILLYS, LLC<br>SHELLY M CRAIG<br>350 SCHOOL RD<br>MIDVALE ID 83645 |         | SHELLY M CRAIG<br>350 SCHOOL RD<br>MIDVALE ID 83645 |                     |
|                                                                                                                                                        |                |                                                                                                                                                                      |         | 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                                                                                                                                                | SHELLY M CRAIG | 350 SCHOOL RD                                                                                                                                                        | MIDVALE | ID                                                  | 83645               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 47424</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Shelly M. Craig<br>Name (type or print): Shelly M. Craig<br>Date: 01/03/2016<br>Title: Owner                         |         |                                                     |                     |
| Processed 01/03/2016                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                            |         |                                                     |                     |