

|                                                                                                                                                        |                  |                                                                                                                                                                   |          |                                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 31471</b>                                                                                                                                     |                  | <b>Due no later than Jun 30, 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>1. Mailing Address: Correct in this box if needed.</b><br><br>K & B RENTALS, L.L.C.<br>BRENDA K STORY<br>3421 S. KIMBALL AVE.<br>CALDWELL ID 83605-6240<br>USA |          | KIMBERLY M HARDY<br>3421 S. KIMBALL AVE.<br>CALDWELL ID 83605-6240 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                                   |          | 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                                                                                                                                                 | KIMBERLY M HARDY | 3421 S. KIMBALL AVENUE                                                                                                                                            | CALDWELL | ID                                                                 | USA     | 83605-6240       |  |
| MEMBER                                                                                                                                                 | BRENDA K STORY   | 3421 S. KIMBALL AVENUE                                                                                                                                            | CALDWELL | ID                                                                 | USA     | 83605-6240       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                                 |          |                                                                    |         |                  |  |
| <b>ID<br/>W 31471</b>                                                                                                                                  |                  | Signature: Brenda Story                                                                                                                                           |          |                                                                    |         | Date: 05/04/2017 |  |
|                                                                                                                                                        |                  | Name (type or print): Brenda Story                                                                                                                                |          |                                                                    |         | Title: Member    |  |
| Processed 05/04/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                         |          |                                                                    |         |                  |  |