No. W 106022	Annual Report Form ECRETARY OF STATE 50 N 4th STREET O BOX 83720 Annual Report Form 1. Mailing Address: Correct in this box if needed. JON THOMAS LLC	2. Registered Agent and Office (NOT A P.O. BOX) JON THOMAS 110 S 7TH ST BELLEVUE ID 83313
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature.
Manager or Member Manager Member Manager Member Manager Member Manager Member Manager Member Manager Member	Companies: Enter Names and Addresses of Manage Name Street or PO Address City Jon Thomas 1120 Woodside Blvd. Har	State Country Postal Code
5. Organized Under the Lav IDAHO W 106022	No of: 6. Signature: Name (type or print): Signature: Name (type or print):	Date: 7/13/15 Title: Owner

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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Issued 07/08/2015 by SLD