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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 136819</b>                                                                                                                                    |                  | Due no later than Apr 30, 2017                                                                                                                                   |       | 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>ECOLUX LLC<br>ADAM J SCHAFFNER<br>639<br>EAGLE ID 83616<br>USA |       | BUSINESS FILINGS INCORPORATED<br>921 S ORCHARD ST STE G<br>BOISE ID 83616-8361 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                                  |       | 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                                                                                                                                                | ADAM J SCHAFFNER | 639 EAGLE HILLS WAY                                                                                                                                              | EAGLE | ID                                                                             | USA     | 83616       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 136819</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Adam J Schaffner<br>Name (type or print): Adam J Schaffner<br>Date: 02/20/2017<br>Title: Manager                 |       |                                                                                |         |             |  |
| Processed 02/20/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                        |       |                                                                                |         |             |  |