

No. W 1368		Due no later than Jul 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DESERT MOUNTAIN, L.L.C. NORMAN LANCASTER 2524 EAST 3719 NORTH TWIN FALLS ID 83301		NORM LANCASTER 2524 EAST 3719 NORTH TWIN FALLS ID 83301		
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MANAGER	Name NORMAN LANCASTER	Street or PO Address 2524 E 3719 N	City TWIN FALLS	State ID	Country	Postal Code 83301
5. Organized Under the Laws of: ID W 1368		6. Annual Report must be signed.* Signature: NORMAN LANCASTER Name (type or print): NORMAN LANCASTER Date: 05/18/2017 Title: PRESIDENT				
Processed 05/18/2017 * Electronically provided signatures are accepted as original signatures.						