

|                                                                                                                                                        |                 |                                                                                                                                                              |           |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 113469</b>                                                                                                                                    |                 | <b>Due no later than Apr 30, 2018</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>ODEN BAY PROPERTIES 1, LLC<br>HARRY A MENSER<br>733 KANIKSU SHORES RD<br>SANDPOINT ID 83864 |           | HARRY A MENSER<br>733 KANIKSU SHORES RD<br>SANDPOINT ID 83864 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                              |           | 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                                                                                                                                                 | DANIEL J MENSER | 2405 SQUAK MOUNTAIN LOOP SW                                                                                                                                  | ISSAQUAH  | WA                                                            | USA     | 98027       |  |
| MEMBER                                                                                                                                                 | HARRY A MENSER  | 733 KANIKSU SHORES RD                                                                                                                                        | SANDPOINT | ID                                                            | USA     | 83864       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 113469</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Dan Menser<br>Name (type or print): Dan Menser                                                               |           |                                                               |         |             |  |
| Date: 04/09/2018<br>Title: Member                                                                                                                      |                 |                                                                                                                                                              |           |                                                               |         |             |  |
| Processed 04/09/2018                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                    |           |                                                               |         |             |  |