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| No. W 9217 | | Due no later than Jul 31, 2015 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. ROWE & ASSOCIATES, L.L.C. CRAIG ROWE 4812 SOUTH FERN ST. NAMPA ID 83686 | | ALLAN R BOSCH 205 N 10TH ST 4TH FL BOISE ID 83702 | | | |
| 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 MEMBER | Name CRAIG ROWE | Street or PO Address 4812 SOUTH FERN ST. | | City NAMPA | State ID | Country | Postal Code 83686 |
| 5. Organized Under the Laws of: ID W 9217 | | 6. Annual Report must be signed.* Signature: J. Craig Rowe Name (type or print): J. Craig Rowe Date: 06/09/2015 Title: Member | | | | | |
| Processed 06/09/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |