

|  |                 |  |             |   |         |             |  |
|--|-----------------|--|-------------|---|---------|-------------|--|
| No. <b>W 86010</b>   |                 | <b>Due no later than Aug 31, 2017</b><br><b>Annual Report Form</b>   |             | 2. Registered Agent and Address ( <b>NO PO BOX</b> )                  |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>WHEELER PROPERTIES, LLC<br>C/O BV MANAGEMENT SERVICES, INC.<br>PO BOX 51298<br>IDAHO FALLS ID 83405 |             | THEL W CASPER ESQ<br>901 PIER VIEW DR STE 201<br>IDAHO FALLS ID 83402 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                 |  |             | 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  | CASEY WHEELER   | PO BOX 3249  | IDAHO FALLS | ID  | USA     | 83403       |  |
| MANAGER  | BRIANNA WHEELER | PO BOX 3249  | IDAHO FALLS | ID  | USA     | 83403       |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 86010</b>                                 |                 | 6. Annual Report must be signed.*<br><br>Signature: Casey Wheeler<br>Name (type or print): Casey Wheeler   |             |   |         |             |  |
|  |                 | Date: 09/01/2017<br>Title: Manager   |             |   |         |             |  |
| Processed 09/01/2017   |                 | * Electronically provided signatures are accepted as original signatures.  |             |   |         |             |  |