

|                                                                                                                                                        |               |                                                                                                                                                  |        |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|------------------|--|
| No. <b>C 170422</b>                                                                                                                                    |               | <b>Due no later than Dec 31, 2017</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>WES-TEX ENTERPRISES, INC.<br>LARRY T BURKE<br>PO BOX 1109<br>MCCALL ID 83638<br>USA |        | LARRY BURKE<br>14062 MORRELL RD<br>MCCALL ID 83638 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                                  |        | 3. <u>New</u> Registered Agent Signature:*         |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |               |                                                                                                                                                  |        |                                                    |         |                  |  |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                                             | City   | State                                              | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | LARRY T BURKE | PO BOX 1109                                                                                                                                      | MCCALL | ID                                                 | USA     | 83638            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                                |        |                                                    |         |                  |  |
| <b>ID<br/>C 170422</b>                                                                                                                                 |               | Signature: LARRY T BURKE                                                                                                                         |        |                                                    |         | Date: 01/13/2018 |  |
|                                                                                                                                                        |               | Name (type or print): LARRY T BURKE                                                                                                              |        |                                                    |         | Title: President |  |
| Processed 01/13/2018                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                        |        |                                                    |         |                  |  |