

No. <b>W 4465</b>		<b>Due no later than Aug 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  JOHNSON HELICOPTERS, L.L.C. CARL JOHNSON PO BOX 506 HOMEDALE ID 83628		DAN C GROBER 17 E WYOMING AVE HOMEDALE ID 83628-8362			
<b>NO FILING FEE IF 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 MANAGER	Name CARL JOHNSON	Street or PO Address 119 AIRPORT WAY P.O. BOX 506		City HOMEDALE	State ID	Country USA	Postal Code 83628
5. Organized Under the Laws of:  <b>ID</b> <b>W 4465</b>		6. Annual Report must be signed.*  Signature: Carl Johnson Name (type or print): Carl Johnson  Date: 06/19/2017 Title: Manager					
Processed 06/19/2017 * Electronically provided signatures are accepted as original signatures.							