

|  |                 |  |            |  |                     |
|--|-----------------|--|------------|--|---------------------|
| No. <b>W 45749</b>   |                 | <b>Due no later than Dec 31, 2016</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SPRINGS INSPECTIONS, LLC<br>BRANDON SPRINGS<br>2900 N GOVERNMENT WAY #37<br>COEUR D ALENE ID 83815 |            | BRANDON SPRINGS<br>3895 E 1ST AVE<br>POST FALLS ID 83854 |                     |
|  |                 |  |            | 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   | BRANDON SPRINGS | 3895 E 1ST AVE   | POST FALLS | ID   | 83854               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 45749</b>   |                 | 6. Annual Report must be signed.*<br>Signature: brandon springs<br>Name (type or print): brandon springs<br>Date: 11/08/2016<br>Title: owner   |            |  |                     |
| Processed 11/08/2016   |                 | * Electronically provided signatures are accepted as original signatures.  |            |  |                     |