

|                                                                                                                                                        |                 |                                                                                                                                                                                     |           |                                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 180788</b>                                                                                                                                    |                 | <b>Due no later than Mar 31, 2018</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>PWIID 1, LLC<br>VICTORIA NORRIS<br>3225 MCLEOD DR SUITE 100<br>LAS VEGAS NV 89121 |           | ANDERSON REGISTERED AGENTS, IN<br>800 W MAIN ST STE 1460<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                                     |           | 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                                                                                                                                                | VICTORIA NORRIS | 3225 MCLEOD DR SUITE 100                                                                                                                                                            | LAS VEGAS | NV                                                                         | USA     | 89121       |  |
| MANAGER                                                                                                                                                | DANIEL NORRIS   | 3225 MCLEOD DR SUITE 100                                                                                                                                                            | LAS VEGAS | NV                                                                         | USA     | 89121       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 180788</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Victoria Norris<br>Name (type or print): Victoria Norris                                                                            |           |                                                                            |         |             |  |
|                                                                                                                                                        |                 | Date: 02/26/2018<br>Title: Manager                                                                                                                                                  |           |                                                                            |         |             |  |
| Processed 02/26/2018                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                           |           |                                                                            |         |             |  |