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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------|---------|------------------|--|
| No. <b>W 150220</b>                                                                                                                                    |             | <b>Due no later than Apr 30, 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>1. Mailing Address: Correct in this box if needed.</b><br><br>EXCEEDING EXPECTATIONS ENTERPRISES LLC<br>KEITH JONES<br>15765 CUPID DR<br>CALDWELL ID 83607 |          | KEITH JONES<br>15765 CUPID DR<br>CALDWELL ID 83607-8360 |         |                  |  |
|                                                                                                                                                        |             |                                                                                                                                                               |          | 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                                                                                                                                                 | KEITH JONES | 15765 CUPID DR                                                                                                                                                | CALDWELL | ID                                                      | USA     | 83607            |  |
| 5. Organized Under the Laws of:                                                                                                                        |             | 6. Annual Report must be signed.*                                                                                                                             |          |                                                         |         |                  |  |
| <b>ID<br/>W 150220</b>                                                                                                                                 |             | Signature: Keith Jones                                                                                                                                        |          |                                                         |         | Date: 02/23/2016 |  |
|                                                                                                                                                        |             | Name (type or print): Keith Jones                                                                                                                             |          |                                                         |         | Title: Owner     |  |
| Processed 02/23/2016                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                     |          |                                                         |         |                  |  |