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|--|---|---|-------|---|---------------------|
| No. W 44971 | | Due no later than Nov 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. 1219 W HAWK PLACE, LLC GENE ODELL 9740 SHIELDS AVE BOISE ID 83714 USA | | GENE O'DELL 9740 W SHIELDS AVE BOISE ID 83714 | |
| | | | | 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 | GENE O'DELL | 5061 DECATUR DR | BOISE | ID | 83704 |
| MEMBER | THE EUGENE & PAMELA J. O'DELL LIVING TRUST | 5061 DECATUR DRIVE | BOISE | ID | USA 83704 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | |
| ID W 44971 | | Signature: EUGENE ODELL | | Date: 09/20/2015 | |
| | | Name (type or print): EUGENE ODELL | | Title: MANAGER | |
| Processed 09/20/2015 | | * Electronically provided signatures are accepted as original signatures. | | | |