| No. <b>W 5530</b>                                                                                     |                                                                                              | Due no later than Feb 28, 2018                                                                                                      | 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 |                                                                                              | Annual Report Form  1. Mailing Address: Correct in this box if needed.  KNOWLTON & MILES, PLLC 312 SEVENTEENTH ST LEWISTON ID 83501 | RICHARD M CUDDIHY 312 SEVENTEENTH ST LEWISTON ID 83501  3. New Registered Agent Signature:* |       |         |             |  |
| 4. Limited Liability Con                                                                              |                                                                                              | nes and Addresses of at least one Member or Manager.                                                                                |                                                                                             |       |         |             |  |
| Office Held                                                                                           | Name                                                                                         | Street or PO Address                                                                                                                | City                                                                                        | State | Country | Postal Code |  |
| MANAGER                                                                                               | RICK CUDDII                                                                                  | Υ 312 17TH ST                                                                                                                       | LEWISTON                                                                                    | ID    |         | 83501       |  |
| 5. Organized Under the Laws of:                                                                       |                                                                                              | 6. Annual Report must be signed.*                                                                                                   |                                                                                             |       |         |             |  |
| ID                                                                                                    |                                                                                              | Signature: Richard Cuddihy                                                                                                          | Date: 12/21/2017                                                                            |       |         |             |  |
| W 5530                                                                                                |                                                                                              | Name (type or print): Richard Cuddihy                                                                                               | Title: Manager                                                                              |       |         |             |  |
| Processed 12/21/2017                                                                                  | ocessed 12/21/2017 * Electronically provided signatures are accepted as original signatures. |                                                                                                                                     |                                                                                             |       |         |             |  |