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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------------------|
| No. <b>W 42318</b>                                                                                                                                     |            | Due no later than Aug 31, 2016<br><b>Annual Report Form</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>CODOCS LLC<br>DAVID KENT<br>413 ALLUMBAUGH STE 101<br>BOISE ID 83704  |       | DAVID KENT<br>355 ROOSTER DR<br>EAGLE ID 83616     |                     |
|                                                                                                                                                        |            |                                                                                                                                    |       | 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                                                                                                                                                | DAVID KENT | 355 ROOSTER DR                                                                                                                     | EAGLE | ID                                                 | 83616               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 42318</b>                                                                                           |            | 6. Annual Report must be signed.*<br>Signature: david kent<br>Name (type or print): david kent<br>Date: 06/24/2016<br>Title: owner |       |                                                    |                     |
| Processed 06/24/2016                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                          |       |                                                    |                     |