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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------|---------------------|
| No. <b>W 70030</b>                                                                                                                                     |                                               | <b>Due no later than Jan 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>B A S O PROPERTY MANAGEMENT LLC<br>STEVE KEMBEL<br>PO BOX 1425<br>TWIN FALLS ID 83303 |            | ROBERT J DYSON<br>1880 KIMBERLY RD<br>TWIN FALLS ID 83301 |                     |
|                                                                                                                                                        |                                               |                                                                                                                                                                                         |            | 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                                                                                                                                                 | ROBERT J AND PATRICIA M DYSON<br>LIVING TRUST | 3719 N 2544 E                                                                                                                                                                           | TWIN FALLS | ID                                                        | 83301               |
| MEMBER                                                                                                                                                 | STEVEN J KEMBEL                               | 3387 N 3289 E                                                                                                                                                                           | KIMBERLY   | ID                                                        | 83341               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 70030</b>                                                                                           |                                               | 6. Annual Report must be signed.*<br>Signature: Steve Kembel<br>Name (type or print): Steve Kembel<br>Date: 02/01/2018<br>Title: Managing Member                                        |            |                                                           |                     |
| Processed 02/01/2018                                                                                                                                   |                                               | * Electronically provided signatures are accepted as original signatures.                                                                                                               |            |                                                           |                     |