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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 179619</b>                                                                                                                                    |            | <b>Due no later than Mar 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>1. Mailing Address: Correct in this box if needed.</b><br>RANCHO LAS VEGAS PROPERTY, LLC<br>LOGAN HALL<br>PO BOX 50620<br>IDAHO FALLS ID 83405 |             | RYAN B MEIKLE<br>3875 AMERICAN WAY<br>IDAHO FALLS ID 83402 |         |             |  |
|                                                                                                                                                        |            |                                                                                                                                                   |             | 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                                                                                                                                                | LOGAN HALL | PO BOX 50620                                                                                                                                      | IDAHO FALLS | ID                                                         | USA     | 83405       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 179619</b>                                                                                              |            | 6. Annual Report must be signed.*<br>Signature: Ryan Meikle<br>Name (type or print): Ryan Meikle                                                  |             |                                                            |         |             |  |
|                                                                                                                                                        |            | Date: 02/21/2018<br>Title: Agent                                                                                                                  |             |                                                            |         |             |  |
| Processed 02/21/2018                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                         |             |                                                            |         |             |  |