| No. W 125308 | | Due no later than May 31, 2017 | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|---|--|---|-------|---------|---------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. RMH9 LLC STEVE RICE PO BOX 66 | STEVEN L RICE 210601 S SHANGRI LA LANE HARRISON ID 83833 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | HARRISON ID 83833 | | | | | |
| 200 | | mes and Addresses of at least one Member or Manager. | Cit | Chata | C | De stal Carla | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | STEVE RICE | PO BOX 66 | HARRISON | ID | USA | 83833 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: TAMI KRAACK | Date: 03/20/2017 | | | | |
| W 125308 | | Name (type or print): TAMI KRAACK | Title: OFFICE MANAGER | | | | |
| Processed 03/20/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | |