

|                                                                                                                                                        |              |                                                                                                                                                                                    |       |                                                               |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------|---------|------------------|--|
| No. <b>C 202890</b>                                                                                                                                    |              | <b>Due no later than Jul 31, 2015</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>D STREET MHP COMPANY<br>D STREET MHP CO<br>1915 W STATE ST 331<br>BOISE ID 83702 |       | ALTURUS HOLDINGS LLC<br>1915 W STATE ST 331<br>BOISE ID 83702 |         |                  |  |
|                                                                                                                                                        |              |                                                                                                                                                                                    |       | 3. <u>New</u> Registered Agent Signature:*                    |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |              |                                                                                                                                                                                    |       |                                                               |         |                  |  |
| Office Held                                                                                                                                            | Name         | Street or PO Address                                                                                                                                                               | City  | State                                                         | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | BLAKE FURLOW | 1915 W STATE ST 331                                                                                                                                                                | BOISE | ID                                                            | USA     | 83702            |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                                                                                                  |       |                                                               |         |                  |  |
| <b>ID<br/>C 202890</b>                                                                                                                                 |              | Signature: Blake Furlow                                                                                                                                                            |       |                                                               |         | Date: 05/21/2015 |  |
|                                                                                                                                                        |              | Name (type or print): Blake Furlow                                                                                                                                                 |       |                                                               |         | Title: Manager   |  |
| Processed 05/21/2015                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                                          |       |                                                               |         |                  |  |