

|  |                 |   |       |  |         |                           |  |
|--|-----------------|---|-------|--|---------|---------------------------|--|
| No. <b>W 124678</b>  |                 | <b>Due no later than Apr 30, 2017</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><br>SISTERHOOD LLC<br>DAVID A JOHNSON<br>13044 W WOODSPRING ST<br>BOISE ID 83713 |       | DAVID A JOHNSON<br>13044 W WOODSPRING ST<br>BOISE ID 83713 |         |                           |  |
|  |                 |   |       | 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 A JOHNSON | 13044 W WOODSPRING ST   | BOISE | ID   | USA     | 83713                     |  |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |       |  |         |                           |  |
| <b>ID<br/>W 124678</b>   |                 | Signature: David A Johnson  |       |  |         | Date: 02/22/2017          |  |
|  |                 | Name (type or print): David A Johnson   |       |  |         | Title: Operations Officer |  |
| Processed 02/22/2017   |                 | * Electronically provided signatures are accepted as original signatures.   |       |  |         |                           |  |