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|--|------------------|--|-------------|--|---------|-------------|--|
| No. W 79571 | | Due no later than Dec 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. FAT SMITTY'S L.L.C. WESLEY T SMITH 5126 E RIRIE HWY IDAHO FALLS ID 83401 | | WESLEY T SMITH 5126 E RIRIE HWY IDAHO FALLS ID 83401 | | | |
| | | | | 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 | ROXANNE V. SMITH | 5126 E. RIRIE HWY | IDAHO FALLS | ID | USA | 83401 | |
| MEMBER | SHYLA A DIXON | 4024 OLSEN | IONA | ID | USA | 83427 | |
| 5. Organized Under the Laws of: ID W 79571 | | 6. Annual Report must be signed.* Signature: Roxanne Smith Name (type or print): Roxanne Smith Date: 11/02/2016 Title: Manager | | | | | |
| Processed 11/02/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |