

|                                                                                                                                                        |                |                                                                                                                                                                                     |       |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 107239</b>                                                                                                                                    |                | <b>Due no later than Oct 31, 2016</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>J&S SERVICES L.L.C.<br>JOSEPH P NOBLE<br>5635 DIAMOND RIDGE WAY<br>NAMPA ID 83686 |       | JOSEPH P NOBLE<br>5635 DIAMOND RIDGE WAY<br>NAMPA ID 83686 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                     |       | 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                                                                                                                                                | JOSEPH P NOBLE | 5635 DIAMOND RIDGE WAY                                                                                                                                                              | NAMPA | ID                                                         | USA     | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 107239</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Joe Noble<br>Name (type or print): Joe Noble<br>Date: 10/13/2016<br>Title: owner                                                    |       |                                                            |         |             |  |
| Processed 10/13/2016                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                           |       |                                                            |         |             |  |