| No. <b>W 6074</b>  |   | 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  | 1. Mailing Add<br>WADSWORTH, L<br>KEITH DALE WA<br>POB 103                | Annual Report Form  1. Mailing Address: Correct in this box if needed.  WADSWORTH, LLC KEITH DALE WADSWORTH |                      | KEITH DALE WADSWORTH  1083 E 1500 N  TERRETON ID 83450  3. New Registered Agent Signature:* |         |                |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |                      |   |         |                |  |
| 4. Limited Liability Companies: Ente   | r Names and Addresses   | of at least one Member or Manager.  |                      |   |         |                |  |
| Office Held Name   |   | Street or PO Address  | City                 | State   | Country | Postal Code    |  |
| The second secon | DALE WADSWORTH<br>/ M. WADSWORTH  | 1083 E 1500 N<br>1083 E 1500 N  | TERRETON<br>TERRETON | ID<br>ID  |         | 83450<br>83450 |  |
| 5. Organized Under the Laws of:  | 6. Annual Report m  | 6. Annual Report must be signed.*   |                      |   |         |                |  |
| ID   | Signature: Shirle   | Signature: Shirley M. Wadsworth Date: 05/01/2017  |                      |   |         |                |  |
| W 6074   | Name (type or p   | Name (type or print): Shirley M. Wadsworth Title: Manager   |                      |   |         |                |  |
| Processed 05/01/2017   | * Electronically provided signatures are accepted as original signatures. |   |                      |   |         |                |  |