

| | | | | | |
|--|-------------------|--|-------------|--|---------------------|
| No. W 45440 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. JELLINGSEN, L.L.C. TEKLA B ELLINGSEN 5669 E TRILLIUM LANE HAYDEN LAKE ID 83835-7164 | | MARK ELLINGSEN 608 NORTHWEST BLVD STE 300 COEUR D ALENE ID 83814 | |
| | | | | 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 | JAMES C ELLINGSEN | 5669 E TRILLIUM LANE | HAYDEN LAKE | ID | 83835 |
| MANAGER | TEKLA B ELLINGSEN | 5669 E TRILLIUM LANE | HAYDEN LAKE | ID | 83835 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | |
| ID W 45440 | | Signature: Tekla B Ellingsen Name (type or print): Tekla B Ellingsen | | Date: 11/11/2016 Title: Manager | |
| Processed 11/11/2016 | | * Electronically provided signatures are accepted as original signatures. | | | |