

|                                                                                                                                                        |                     |                                                                                                                                                             |        |                                                                |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------|---------|------------------|--|
| No. <b>W 26358</b>                                                                                                                                     |                     | <b>Due no later than Oct 31, 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>SMITTY'S POLE BUILDINGS, LLC<br>MICHAEL J SMITHWICK<br>173 FINN CHURCH LANE<br>MCCALL ID 83638 |        | MICHAEL J SMITHWICK<br>173 FINN CHURCH LANE<br>MCCALL ID 83638 |         |                  |  |
|                                                                                                                                                        |                     |                                                                                                                                                             |        | 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      |  |
| MEMBER                                                                                                                                                 | MICHAEL J SMITHWICK | 173 FINN CHURCH LANE                                                                                                                                        | MCCALL | ID                                                             | USA     | 83638            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                     | 6. Annual Report must be signed.*                                                                                                                           |        |                                                                |         |                  |  |
| <b>ID<br/>W 26358</b>                                                                                                                                  |                     | Signature: Michael Smithick                                                                                                                                 |        |                                                                |         | Date: 09/03/2017 |  |
|                                                                                                                                                        |                     | Name (type or print): Michael Smithick                                                                                                                      |        |                                                                |         | Title: Owner     |  |
| Processed 09/03/2017                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                   |        |                                                                |         |                  |  |