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|--|----------------------|---|------------|--|---------|------------------------|--|
| No. W 104923 | | Due no later than Jul 31, 2018 | | 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. CORE RECOVERIES, LLC 2600 EASTPOINT PARKWAY SUITE 101 LOUISVILLE KY 40223 | | CORPORATE CREATIONS NETWORK IN 950 W BANNOCK ST #1100 BOISE ID 83702 | | | |
| | | | | 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 | MATTHEW A KORN | 2600 EASTPOINT PARKWAY SUITE 101 | LOUISVILLE | KY | USA | 40223 | |
| MEMBER | THOMAS A. WANTUCK | 2600 EASTPOINT PARKWAY SUITE 101 | LOUISVILLE | KY | USA | 40223 | |
| MEMBER | CHRISTOPHER J ELMORE | 2600 EASPOINT PARKWAY SUITE 101 | LOUISVILLE | KY | USA | 40223 | |
| MANAGER | LEISA P KORN | 2600 EASTPOINT PARKWAY SUITE 101 | LOUISVILLE | KY | USA | 40223 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| KY W 104923 | | Signature: Dina Irizarry | | | | Date: 07/18/2018 | |
| | | Name (type or print): Dina Irizarry | | | | Title: Special Manager | |
| Processed 07/18/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |