

|  |               |  |       |  |         |             |  |
|--|---------------|--|-------|--|---------|-------------|--|
| No. <b>W 40205</b>   |               | <b>Due no later than Jun 30, 2016</b><br><b>Annual Report Form</b>   |       | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>CARPET MASTER, LLC<br>1920 HIGH TOP LN<br>REXBURG ID 83440                |       | JOSH SMITH<br>1920 HIGH TOP LN<br>REXBURG ID 83440   |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |               |  |       | 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   | JOSH SMITH    | PO BOX 307   | TETON | ID   | 83451   |             |  |
| MEMBER   | CAMILLA SMITH | PO BOX 307   | TETON | ID   | 83451   |             |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 40205</b>                                 |               | 6. Annual Report must be signed.*<br><br>Signature: josh smith<br>Name (type or print): josh smith<br><br>Date: 06/01/2016<br>Title: owner |       |  |         |             |  |
| Processed 06/01/2016 * Electronically provided signatures are accepted as original signatures.     |               |  |       |  |         |             |  |