

No. W 114914		Due no later than Jun 30, 2018 Annual Report Form		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 Address: Correct in this box if needed. GRANT JOHN ROTH LLC GRANT ROTH 180 BIRCH ST MALAD CITY ID 83252		GRANT ROTH 180 BIRCH ST MALAD CITY ID 83252			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name GRANT JOHN ROTH	Street or PO Address 180 BIRCH ST		City MALAD CITY	State ID	Country USA	Postal Code 83252
5. Organized Under the Laws of: ID W 114914		6. Annual Report must be signed.* Signature: Grant Roth Name (type or print): Grant Roth Date: 06/28/2018 Title: Manager					
Processed 06/28/2018 * Electronically provided signatures are accepted as original signatures.							