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|--|---|---|--------------------------------|
| No. <b>W 91304</b>   | <b>Due no later than Mar 31, 2016</b><br><b>Annual Report Form</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><br>DEFSV, LLC<br>NORMAN LEOPOLD, EXECUTOR<br>233 MARIPOSA RD<br>HAILEY ID 83333   | PENNY LEOPOLD<br>233 MARIPOSA RD<br>HAILEY ID 83333                       |                                |
|  |   | 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  | NORMAN R LEOPOLD  | 233 MARIPOSA RD   | HAILEY ID USA 83333            |
| 5. Organized Under the Laws of:<br><br><b>WA<br/>W 91304</b>   | 6. Annual Report must be signed.*<br>Signature: Norman Leopold Date: 01/17/2016<br>Name (type or print): Norman Leopold Title: Executor/Manager |   |                                |
| Processed 01/17/2016   |   | * Electronically provided signatures are accepted as original signatures. |                                |