| No. <b>W 4175</b>  |      | Due no later than Jun 30, 2018                         |                           | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|------|--|---------------------------|-----------------|---|---------|-------------|--|
| Return to:   |      | Annual Report Form                                     |                           |                 | WILLIAM H HURST                             |         |             |  |
| SECRETARY OF STATE 700 WEST JEFFERSON  |      | 1. Mailing Address: Correct in this box if needed.     |                           |                 | 407 S 9TH AVE<br>CALDWELL ID 83605          |         |             |  |
| PO BOX 83720<br>BOISE, ID 83720-0080   |      | A-OK CONTRACTORS, LLC CLINT KIMBALL 19244 ALLENDALE RD |                           |                 |   |         |             |  |
|  |      | WILDER ID 83676-5552                                   |                           | 3. New Registe  | 3. New Registered Agent Signature:*         |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |      |  |                           |                 |   |         |             |  |
| 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 CLINT R KIN  |      | MBALL  | 19244 ALLENDALE RD        | WILDER          | ID  |         | 83676-5552  |  |
| 5. Organized Under the Laws of:  |      | 6. Annual Report must be signed.*                      |                           |                 |   |         |             |  |
| ID   |      | Signature: clint r kimball                             |                           |                 | Date: 04/24/2018                            |         |             |  |
| W 4175   |      | Name (type o   | r print): clint r kimball |                 | Title: manager                              |         |             |  |
| Processed 04/24/2018 * Electronically provided signatures are accepted as original signatures. |      |  |                           |                 |   |         |             |  |