

|                                                                                                                                                        |                      |                                                                                                                                                            |       |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 167867</b>                                                                                                                                    |                      | <b>Due no later than Jun 30, 2017</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>ENGLISH HANDYMAN GARDENER LLC (THE)<br>THOMAS GREEN<br>1723 S LEADVILLE AVE<br>BOISE ID 83706 |       | THOMAS GREEN<br>1723 S LEADVILLE AVE<br>BOISE ID 83706 |         |             |  |
|                                                                                                                                                        |                      |                                                                                                                                                            |       | 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                                                                                                                                                | THOMAS LEONARD GREEN | 1723 S LEADVILLE AVE                                                                                                                                       | BOISE | ID                                                     | USA     | 83706       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 167867</b>                                                                                          |                      | 6. Annual Report must be signed.*<br>Signature: thomas green<br>Name (type or print): thomas green<br>Date: 06/30/2017<br>Title: registered agent          |       |                                                        |         |             |  |
| Processed 06/30/2017                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                  |       |                                                        |         |             |  |