| No. <b>W 143393</b> Return to:   |           | Due no later than Oct 31, 2016  Annual Report Form |                      | 2 | 2. Registered Agent and Address (NO PO BOX)  CHARLES B PAULEY                      |       |         |             |
|--|-----------|--|----------------------|---|--|-------|---------|-------------|
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |           |  | - <del></del> -      | _ | 2779 SMOKEY BOULDER ROAD NEW MEADOWS ID 83654  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  | CHARLES B | PAULEY   | 325 S DITMAR STREET  |   | OCEANSIDE  | CA    | USA     | 92054       |
| 5. Organized Under the Laws of:  |           | 6. Annual Report must be signed.*                  |                      |   |  |       |         |             |
| ID   |           | Signature: Charles Pauley                          |                      |   | Date: 11/22/2016   |       |         |             |
| W 143393   |           | Name (type or print): Charles Pauley               |                      |   | Title: Manager   |       |         |             |
| Processed 11/22/2016 * Electronically provided signatures are accepted as original signatures. |           |  |                      |   |  |       |         |             |