| No. <b>W 143440</b> Return to:   |   | Due no later than Oct 31, 2017 Annual Report Form  |                                      |          | 2. Registered Agent and Address (NO PO BOX) GEOFFREY L SMITH                |         |             |  |
|--|---|--|--------------------------------------|----------|---|---------|-------------|--|
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |   | 1. Mailing Address: Correct in this box if needed. GLSMITH HOLDINGS, LLC GEOFFREY L SMITH 195 N TRIANGLE DRIVE PONDERAY ID 83852 |                                      | PONDERAY | 195 N TRIANGLE DRIVE PONDERAY ID 83852  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |  |                                      |          |   |         |             |  |
| 4. Limited Liability Compar  | nies: Enter Nar   | mes and Addresse   | s of at least one Member or Manager. |          |   |         |             |  |
| Office Held  | Name  |  | Street or PO Address                 | City     | State   | Country | Postal Code |  |
| MEMBER   | GEOFFREY L  | . SMITH  | 195 N TRIANGLE DRIVE                 | PONDERAY | ID  | USA     | 83852       |  |
| 5. Organized Under the Laws of:  |   | 6. Annual Report must be signed.*  |                                      |          |   |         |             |  |
| ID   |   | Signature: Denise Bangle   |                                      |          | Date: 08/21/2017  |         |             |  |
| W 143440   |   | Name (type or print): Denise Bangle  |                                      |          | Title: Controller   |         |             |  |
| Processed 08/21/2017   | * Electronically provided signatures are accepted as original signatures. |  |                                      |          |   |         |             |  |