

|                                                                                                                                                        |                 |                                                                                                                                                                                    |       |                                                                      |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------|---------|
| No. <b>W 106341</b>                                                                                                                                    |                 | <b>Due no later than Aug 31, 2016</b>                                                                                                                                              |       | <b>2. Registered Agent and Address (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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>RIVERSIDE HOSPITALITY, LLC<br>DAVID L JOHNSON<br>P.O. BOX 8506<br>BOISE ID 83707 |       | GIVENS PURSLEY CORPORATE SERVI<br>601 W BANNOCK ST<br>BOISE ID 83702 |         |
|                                                                                                                                                        |                 |                                                                                                                                                                                    |       | 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 |
| MANAGER                                                                                                                                                | DAVID L JOHNSON | P.O. BOX 8506                                                                                                                                                                      | BOISE | ID                                                                   | USA     |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 106341</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: David Johnson<br>Name (type or print): David Johnson<br>Date: 06/19/2016<br>Title: Manager                                         |       |                                                                      |         |
| Processed 06/19/2016                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                          |       |                                                                      |         |