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|--|--|---|---|-------|---------|-------------|
| No. <b>W 98323</b>   | <b>Due no later than Dec 31, 2016</b><br><b>Annual Report Form</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>  |   | BRUCE PETERSON<br>2400 N ALDER DR<br>FRUITLAND ID 83619 |       |         |             |
|  | SPIERCE TECHNOLOGIES, LLC<br>SCOTT PIERCE<br>8188 N PENNSYLVANIA AVE<br>FRUITLAND ID 83619         |   | 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 |
| MEMBER   | SCOTT PIERCE   | 8188 N PENNSYLVANIA AVE   | FRUITLAND   | ID    | USA     | 83619       |
| MEMBER   | SARAH E SCOTTO-PIERCE  | 8188 N PENNSYLVANIA AVE   | FRUITLAND   | ID    | USA     | 83619       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 98323</b>   | 6. Annual Report must be signed.*<br>Signature: Scott Pierce<br>Name (type or print): Scott Pierce |   | Date: 10/26/2016<br>Title: Co-Owner                     |       |         |             |
| Processed 10/26/2016   |  | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |