

No. C 53326	Due no later than Apr 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ORVILLE M. GROVES ROUTE 2 PARMA ID 83660
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. 4 G'S, INC. ORVILLE M. GROVES 29416 U OF I LANE PARMA ID 83660		3. <u>New</u> Registered Agent Signature.

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
Pres.	Orville Groves	29416 Univ of Id. Ln	Parma	Id	U.S.A.	83660
Sec.	Fern Groves	29416 Univ of Id Ln.	Parma	Id	U.S.A.	83660
Director	Orville Groves	29416 Univ of Id Ln.	Parma	Id.	U.S.A.	83660
Director	Fern L. Groves	29416 Univ of Id Ln.	Parma	Id.	U.S.A.	83660

5. Organized Under the Laws of: IDAHO C 53326	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <i>Fern L. Groves</i> </td> <td style="width: 40%;"> Date: <i>April 2, 2016</i> </td> </tr> <tr> <td> Name (type or print): <i>FERN L. GROVES</i> </td> <td> Title: <i>Sec.</i> </td> </tr> </table>	Signature: <i>Fern L. Groves</i>	Date: <i>April 2, 2016</i>	Name (type or print): <i>FERN L. GROVES</i>	Title: <i>Sec.</i>
Signature: <i>Fern L. Groves</i>	Date: <i>April 2, 2016</i>				
Name (type or print): <i>FERN L. GROVES</i>	Title: <i>Sec.</i>				

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