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|--|--|--------------------------------------|---|-------------|----------------|----------------------------------|--|
| No. <b>W 184129</b>  | <b>Due no later than May 31, 2018</b><br><b>Annual Report Form</b>   |                                      | 2. Registered Agent and Address ( <b>NO PO BOX</b> )  |             |                |                                  |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>ARCTIC DISTRIBUTION LLC<br>ANTHONY ARTHO<br>100 DORAL DR<br>JEROME ID 83338 |                                      | ANTHONY ARTHO<br>100 DORAL DR<br>JEROME ID 83338-8333 |             |                |                                  |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |  |                                      | 3. <u>New</u> Registered Agent Signature:*            |             |                |                                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |  |                                      |   |             |                |                                  |  |
| Office Held<br>MEMBER  | Name<br>ANTHONY A ARTHO  | Street or PO Address<br>100 DORAL DR | City<br>JEROME  | State<br>ID | Country<br>USA | Postal Code<br>83338             |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 184129</b>                                | 6. Annual Report must be signed.*<br><br>Signature: Anthony Artho<br>Name (type or print): Anthony Artho                                     |                                      |   |             |                | Date: 06/25/2018<br>Title: Owner |  |
| Processed 06/25/2018   | * Electronically provided signatures are accepted as original signatures.  |                                      |   |             |                |                                  |  |