| No. <b>C 200127</b>  |           | Due no later than Oct 31, 2017   |  | [:       | 2. Registered Agent and Address (NO PO BOX)                                       |       |         |             |
|--|-----------|--|--|----------|---|-------|---------|-------------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |           | Annual Report Form  1. Mailing Address: Correct in this box if needed.  ONELOVE, INC. CORY L THACKER 220 10TH AVE S NAMPA ID 83651 |  |          | CORY L THACKER 220 10TH AVE S NAMPA ID 83651  3. New Registered Agent Signature:* |       |         |             |
| RECEIVED B   |           | poss Addresses of  | President, Secretary, and Directors. Treas | curor (c | ontional)   |       |         |             |
| Office Held  | Name      | iess Addi esses di   | Street or PO Address                       | surer (c | City  | State | Country | Postal Code |
| PRESIDENT  | CORY L TH | ACKER  | 5900 W. USTICK RD                          |          | MERIDIAN  | ID    | USA     | 83646       |
| 5. Organized Under the Laws of:  |           | 6. Annual Report must be signed.*  |  |          |   |       |         |             |
| ID<br>C 200127   |           | Signature: Cory L. Thacker   |  |          | Date: 10/04/2017  |       |         |             |
|  |           | Name (type or print): Cory L. Thacker  |  |          | Title: President  |       |         |             |
| Processed 10/04/20   | 17        | * Electronically p   | rovided signatures are accepted as origina | al signa | tures.  |       |         |             |