| No. W 153942 | | later than Jul 31, 2017 | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|---|-------------------------|---|---|---------|-------------|--|
| Return to: | | Annual Report Form | | CHRISTOPHER FARNSWORTH | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address SNAKE RIVER SYSTE 3937 N TIPTON WAY MERIDIAN ID 8364 | | MERIDIAN ID | 3937 N TIPTON WAY MERIDIAN ID 83646 . New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 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 CHRISTOPHE | ER M FARNSWORTH | 3937 N TIPTON WAY | MERIDIAN | ID | USA | 83646 | |
| 5. Organized Under the Laws of: | 6. Annual Report must | | | | | | |
| ID | Signature: Christoph | Date: 08/27/2017 | | | | | |
| W 153942 | Name (type or print): Christopher Farnsworth | | Title: Member | | | | |
| Processed 08/27/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | |