| No. W 179580 | | Due no later than Mar 31, 2018 | | 2 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------|---|---------------------------------------|----|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | | ALLISON TUSZYNSKI 124 E CURLING DR BOISE ID 83702-8370 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. AB3 ASSET MANAGEMENT & ADVISORY SERVICES LLC ALLISON TUSZYNSKI 124 E CURLING DR BOISE ID 83702 | | LC | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 4. Limited Liability Compa | nies: Enter Na | ames and Address | es of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| MEMBER | ALLISON T | USZYNSKI | 124 | | BOISE | ID | USA | 83702 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Allison Tuszynski | | | Date: 03/25/2018 | | | |
| W 179580 | | Name (type or print): Allison Tuszynski | | | Title: President | | | |
| Processed 03/25/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |