

|                                                                                                                                                        |                |                                                                                                                                                          |             |                                                         |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------|---------|------------------|--|
| No. <b>W 176899</b>                                                                                                                                    |                | <b>Due no later than Jan 31, 2018</b>                                                                                                                    |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>1. Mailing Address: Correct in this box if needed.</b><br>NEW SWEDEN RENEWABLE ENERGY, LLC<br>NATHAN B ADAMS<br>5744 S 65TH W<br>IDAHO FALLS ID 83402 |             | NATHAN B ADAMS<br>5744 S 65TH W<br>IDAHO FALLS ID 83402 |         |                  |  |
|                                                                                                                                                        |                |                                                                                                                                                          |             | 3. <u>New</u> Registered Agent Signature:*              |         |                  |  |
| 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      |  |
| MANAGER                                                                                                                                                | NATHAN B ADAMS | 5744 S 65TH W                                                                                                                                            | IDAHO FALLS | ID                                                      | USA     | 83402            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                        |             |                                                         |         |                  |  |
| <b>ID<br/>W 176899</b>                                                                                                                                 |                | Signature: Nathan B Adams                                                                                                                                |             |                                                         |         | Date: 01/12/2018 |  |
|                                                                                                                                                        |                | Name (type or print): Nathan B Adams                                                                                                                     |             |                                                         |         | Title: Owner     |  |
| Processed 01/12/2018                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                |             |                                                         |         |                  |  |