

|  |  |   |   |       |         |             |
|--|--|---|---|-------|---------|-------------|
| No. <b>W 82948</b>   | <b>Due no later than Apr 30, 2016</b><br><b>Annual Report Form</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>RICKS LAW OFFICE, PLLC<br>JARED H RICKS<br>PO BOX 309<br>BLACKFOOT ID 83221 |   | JARED HOLYOAK RICKS<br>490 N. MAPLE, STE. E<br>BLACKFOOT ID 83221 |       |         |             |
|  |  |   | 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  | JARED H RICKS  | 927 N 900 E   | SHELLEY   | ID    | USA     | 83274       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 82948</b>   | 6. Annual Report must be signed.*<br>Signature: Jared H. Ricks<br>Name (type or print): Jared H. Ricks                                   |   | Date: 03/25/2016<br>Title: Owner/Manager                          |       |         |             |
| Processed 03/25/2016   |  | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |