| No. W 34695 | | Due no later than Nov 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--------------------|---|------------------|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | DAVID R RISLEY | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if not fruit PROCESS TECHNOLOGY, LLC DAVID R RISLEY PO BOX 1247 LEWISTON ID 83501 | eeded. | 1443 IDAHO ST LEWISTON ID 83501 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Co. | mpanies: Enter Nai | mes and Addresses of at least one Member or Mana | ger. | | | | |
| Office Held | Name | Street or PO Address | | City | State | Country | Postal Code |
| MANAGER | DAVID R RI | SLEY 1106 IDAHO ST | | LEWISTON | ID | | 83501 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: David R. Risley | Date: 09/21/2015 | | | | |
| W 34695 | | Name (type or print): David R. Risley | Title: Manager | | | | |
| Processed 09/21/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | _ | |