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| <b>No. W 139720</b>  | <b>Due no later than Jul 31, 2016</b><br><b>Annual Report Form</b>   |                             | <b>2. Registered Agent and Office (NOT A P.O. BOX)</b><br>MICHAEL EMRY <i>Vicky L. Davis</i><br>10601 HORSESHOE BEND RD #48<br><del>48</del><br><del>BOISE ID 83714</del> <i>da Del Rio</i><br><i>145 Avenida</i><br><i>Twin Falls, ID 83301</i> |
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF RECEIVED BY DUE DATE</b>   | <b>1. Mailing Address: Correct in this box if needed.</b><br>VOICE OF IDAHO LLC (THE)<br><del>MICHAEL EMRY</del> <i>Vicky L. Davis</i><br><del>10601 HORSESHOE BEND RD #48</del><br><del>48</del><br><del>BOISE ID 83714</del> <i>145 Avenida</i><br><i>Del Rio</i><br><i>Twin Falls, ID</i><br><i>83301</i> |                             | <b>3. New Registered Agent Signature.</b><br><i>Vicky L. Davis</i>   |
| <b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>   |  |                             |  |
| <b>Manager or Member</b>   | <b>Name</b>  | <b>Street or PO Address</b> | <b>City State Country Postal Code</b>  |
| Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>  | <i>Becky Hudson c/o 134745 Highway 97 North</i><br><i>Crescent, OR 97733</i>   |                             |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/><br><br>Manager <input type="checkbox"/> Member <input type="checkbox"/><br><br>Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |                             |  |
| <b>5. Organized Under the Laws of:</b><br><br><div style="text-align: center;"> <b>IDAHO</b><br/> <b>W 139720</b> </div>   | <b>6.</b><br>Signature: <i>Vicky L. Davis</i><br><hr/> Name (type or print): <i>Vicky L. Davis</i><br><div style="float: right; text-align: right;">         Date: <i>7-19-16</i><br/> <hr/>         Title: <i>Registered Agent</i> </div>   |                             |  |