

|  |                          |   |  |  |             |                |                      |
|--|--------------------------|---|--|--|-------------|----------------|----------------------|
| No. <b>W 162425</b>  |                          | <b>Due no later than Feb 28, 2018</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )                 |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                          | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>GOLF VERIFIED, LLC<br>JOSHUA DAHLSTROM<br>601 SHERMAN AVE STE 5B<br>COEUR D'ALENE ID 83814 |  | JOSHUA DAHLSTROM<br>601 SHERMAN AVE STE 5B<br>COEUR D'ALENE ID 83814 |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                          |   |  | 3. <u>New</u> Registered Agent Signature:*                           |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                          |   |  |  |             |                |                      |
| Office Held<br>MEMBER  | Name<br>JOSHUA DAHLSTROM | Street or PO Address<br>601 E SHERMAN AVE STE 5B  |  | City<br>COEUR D'ALENE  | State<br>ID | Country<br>USA | Postal Code<br>83814 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 162425</b>                                |                          | 6. Annual Report must be signed.*<br><br>Signature: Joshua Dahlstrom<br>Name (type or print): Joshua Dahlstrom<br><br>Date: 12/21/2017<br>Title: Member     |  |  |             |                |                      |
| Processed 12/21/2017 * Electronically provided signatures are accepted as original signatures.     |                          |   |  |  |             |                |                      |