

|  |                 |  |       |   |         |             |  |
|--|-----------------|--|-------|---|---------|-------------|--|
| No. <b>W 118352</b>  |                 | <b>Due no later than Oct 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><br>B IDAHO CONSULTING LLC<br>BRANDON BEAGLES<br>4879 N ARROW VILLA WAY<br>BOISE ID 83703 |       | BRANDON B BEAGLES<br>4879 N ARROW VILLA WAY<br>BOISE ID 83703 |         |             |  |
|  |                 |  |       | 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  | BRANDON BEAGLES | 4879 N ARROW VILLA WAY   | BOISE | ID  | USA     | 83703       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 118352</b>  |                 | 6. Annual Report must be signed.*<br>Signature: Brandon Beagles<br>Name (type or print): Brandon Beagles<br>Date: 09/13/2018<br>Title: Owner           |       |   |         |             |  |
| Processed 09/13/2018   |                 | * Electronically provided signatures are accepted as original signatures.  |       |   |         |             |  |