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| No. W 98428 | Due no later than Dec 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. LANYAP LIFE SERVICES LLC TAMI GAUPP 3527 S FEDERAL WAY STE 103-104 BOISE ID 83705 | | TAMI GAUPP 3713 W. ROSE HILL ST. BOISE ID 83705 | | | |
| | | | 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 |
| MEMBER | TAMI M GAUPP | 3713 W. ROSE HILL STREET | BOISE | ID | USA | 83705 |
| 5. Organized Under the Laws of: ID W 98428 | | 6. Annual Report must be signed.* Signature: Tami Gaupp Name (type or print): Tami Gaupp Date: 01/15/2018 Title: Registered Agent | | | | |
| Processed 01/15/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | |