

No. W 3486	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct PROTO ONE, LLC THOMAS F MILLER 435 S GREENFERRY RD POST FALLS ID 83854		THOMAS F MILLER 435 S GREENFERRY RD POST FALLS ID 83854 3. Organized Under the Laws of: ID W 3486													
** FINAL NOTICE **																
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>THOMAS F. MILLER</td> <td>435 S. GREENFERRY RD.</td> <td>POST FALLS</td> <td>ID</td> <td>83854</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	THOMAS F. MILLER	435 S. GREENFERRY RD.	POST FALLS	ID	83854
Office held	Name	Street or P.O. Address	City	State	Zip											
PRESIDENT	THOMAS F. MILLER	435 S. GREENFERRY RD.	POST FALLS	ID	83854											
5. New Registered Agent Signature		6. <table border="1"> <tr> <td>Signature</td> <td><i>Thomas F. Miller</i></td> <td>Date</td> <td>10/20/99</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>THOMAS F. MILLER</td> <td>Title</td> <td>PRESIDENT</td> </tr> </table>			Signature	<i>Thomas F. Miller</i>	Date	10/20/99	Name (Typed or Printed)	THOMAS F. MILLER	Title	PRESIDENT				
Signature	<i>Thomas F. Miller</i>	Date	10/20/99													
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ISSUED: 10-02-1999

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