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|--|----------------|--|------|---|---------|-------------|--|
| No. W 173668 | | Due no later than Nov 30, 2017 | | 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. 1111 CALDWELL, LLC MICHAEL R LARSON 459 W MAIN STREET P.O. BOX 905 KUNA ID 83634 USA | | COREY J RIPPEE 459 W MAIN STREET KUNA ID 83634-8363 | | | |
| | | | | 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 | MICHAEL LARSON | 459 W MAIN ST | KUNA | ID | USA | 83634 | |
| 5. Organized Under the Laws of: ID W 173668 | | 6. Annual Report must be signed.* Signature: Michael Larson Name (type or print): Michael Larson | | | | | |
| Date: 12/18/2017 Title: Managing Member | | | | | | | |
| Processed 12/18/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | |