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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 108793</b>                                                                                                                                    |                    | <b>Due no later than Dec 31, 2017</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>CALLEN REFRIGERATION, LLC<br>JEREMY TODD CALLEN<br>PO BOX 539<br>FILER ID 83328 |       | JEREMY CALLEN<br>820 FAIR AVE<br>FILER ID 83328    |         |                  |  |
|                                                                                                                                                        |                    |                                                                                                                                              |       | 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                                                                                                                                                | JEREMY TODD CALLEN | 820 FAIR AVE PO BOX 539                                                                                                                      | FILER | ID                                                 | USA     | 83328            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                    | 6. Annual Report must be signed.*                                                                                                            |       |                                                    |         |                  |  |
| <b>ID<br/>W 108793</b>                                                                                                                                 |                    | Signature: Jeremy Callen                                                                                                                     |       |                                                    |         | Date: 11/01/2017 |  |
|                                                                                                                                                        |                    | Name (type or print): Jeremy Callen                                                                                                          |       |                                                    |         | Title: owner     |  |
| Processed 11/01/2017                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                    |       |                                                    |         |                  |  |