

|                                                                                                                                                        |              |                                                                                                                             |       |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 180092</b>                                                                                                                                    |              | <b>Due no later than Mar 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>NWMT LLC<br>EMILY BLACK<br>PO BOX 748<br>RATHDRUM ID 83858 |       | EMILY BLACK<br>25415 N RAMSEY RD<br>ATHOL ID 83801-8380 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                             |       | 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                                                                                                                                                 | LUKE D BLACK | 25415 N RAMSEY RD                                                                                                           | ATHOL | ID                                                      | USA     | 83801       |  |
| MEMBER                                                                                                                                                 | EMILY BLACK  | 25415 N RAMSEY RD                                                                                                           | ATHOL | ID                                                      | USA     | 83801       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 180092</b>                                                                                          |              | 6. Annual Report must be signed.*<br>Signature: Emily Black<br>Name (type or print): Emily Black                            |       |                                                         |         |             |  |
|                                                                                                                                                        |              | Date: 02/23/2018<br>Title: Owner                                                                                            |       |                                                         |         |             |  |
| Processed 02/23/2018                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                   |       |                                                         |         |             |  |