

|                                                                                                                                                        |               |                                                                                                                                               |           |                                                             |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>W 100362</b>                                                                                                                                    |               | <b>Due no later than Feb 28, 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>MC SOLUTIONS, LLC<br>H BUD SMALLEY<br>5170 LEONARD RD<br>POCATELLO ID 83204-5050 |           | H BUD SMALLEY<br>5170 LEONARD RD<br>POCATELLO ID 83204-5050 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                               |           | 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                                                                                                                                                | H BUD SMALLEY | 5170 LEONARD RD                                                                                                                               | POCATELLO | ID                                                          | USA     | 83204-5050       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                             |           |                                                             |         |                  |  |
| <b>ID<br/>W 100362</b>                                                                                                                                 |               | Signature: H Bud Smalley                                                                                                                      |           |                                                             |         | Date: 12/26/2016 |  |
|                                                                                                                                                        |               | Name (type or print): H Bud Smalley                                                                                                           |           |                                                             |         | Title: Owner     |  |
| Processed 12/26/2016                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                     |           |                                                             |         |                  |  |