

|                                                                                                                                                        |                |                                                                                                                                                                                |           |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------|---------|-------------|--|
| No. <b>C 175721</b>                                                                                                                                    |                | <b>Due no later than Nov 30, 2016</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BINDWEED, INC.<br>RALPH THURSTON<br>361 NORTH 150 WEST<br>BLACKFOOT ID 83221 |           | RALPH THURSTON<br>361 NORTH 150 WEST<br>BLACKFOOT ID 83221 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                |           | 3. <u>New</u> Registered Agent Signature:*                 |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                |                                                                                                                                                                                |           |                                                            |         |             |  |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                                           | City      | State                                                      | Country | Postal Code |  |
| SECRETARY                                                                                                                                              | JERIANN SABIN  | 361 NORTH 150 WEST                                                                                                                                                             | BLACKFOOT | ID                                                         | USA     | 83221       |  |
| PRESIDENT                                                                                                                                              | RALPH THURSTON | 361 NORTH 150 WEST                                                                                                                                                             | BLACKFOOT | ID                                                         | USA     | 83221       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 175721</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Ralph Thurston<br>Name (type or print): Ralph Thurston<br>Date: 09/30/2016<br>Title: President                                 |           |                                                            |         |             |  |
| Processed 09/30/2016                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                      |           |                                                            |         |             |  |