| No. W 87143 | | Due no later than Sep 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 | FIT FACTO TRISH M I PO BOX 170 | Annual Report Form 1. Mailing Address: Correct in this box if needed. FIT FACTORY LLC TRISH M DEIM PO BOX 170375 BOISE ID 83717-0375 | | PATRICIA (TRISH) M DEIM 2490 N EQUESTRIAN PL EAGLE ID 83616 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter | Names and Addre | sses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER PATRICIA | M DEIM | PO BOX 170375 | BOISE | ID | USA | 83717-0375 | |
| 5. Organized Under the Laws of: ID W 87143 | Signature: | oort must be signed.* Trish Deim e or print): Trish Deim | | Date: 08/26/2017 Title: Owner | | | |
| Processed 08/26/2017 | * Electronicall | * Electronically provided signatures are accepted as original signatures. | | | | | |