

|   |                       |  |  |   |             |                |                      |
|---|-----------------------|--|--|---|-------------|----------------|----------------------|
| No. <b>W 89600</b>  |                       | <b>Due no later than Jan 31, 2018</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )        |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                       | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>PUCCETTI CONSULTING SERVICES LLC<br>GARY PUCCETTI<br>3765 S. GEKELER LN # 169<br>BOISE ID 83706 |  | GARY PUCCETTI<br>3765 S. GEKELER LN # 169<br>BOISE ID 83706 |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  |                       |  |  | 3. <u>New</u> Registered Agent Signature:*                  |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.        |                       |  |  |   |             |                |                      |
| Office Held<br>MANAGER  | Name<br>GARY PUCCETTI | Street or PO Address<br>3765 S. GEKELER LN # 169   |  | City<br>BOISE   | State<br>ID | Country<br>USA | Postal Code<br>83706 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 89600</b>                                  |                       | 6. Annual Report must be signed.*<br><br>Signature: Gary Puccetti<br>Name (type or print): Gary Puccetti<br><br>Date: 01/29/2018<br>Title: Manager               |  |   |             |                |                      |
| Processed 01/29/2018      * Electronically provided signatures are accepted as original signatures. |                       |  |  |   |             |                |                      |