

|  |                    |  |  |   |             |         |                           |
|--|--------------------|--|--|---|-------------|---------|---------------------------|
| No. <b>W 29376</b>   |                    | <b>Due no later than Mar 31, 2017</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>BURNS INDUSTRIAL COATINGS, LLC<br>KIRK BURNS C/O BURNS CONCRETE, INC.<br>P.O. BOX 1864<br>IDAHO FALLS ID 83403-1864 |  | KIRK BURNS<br>2385 GALLATIN AVE<br>IDAHO FALLS ID 83402 |             |         |                           |
| <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>KIRK BURNS | Street or PO Address<br>P.O. BOX 1864  |  | City<br>IDAHO FALLS                                     | State<br>ID | Country | Postal Code<br>83403-1864 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 29376</b>                                 |                    | 6. Annual Report must be signed.*<br><br>Signature: Kirk Burns<br>Name (type or print): Kirk Burns<br><br>Date: 01/24/2017<br>Title: Manager   |  |   |             |         |                           |
| Processed 01/24/2017 * Electronically provided signatures are accepted as original signatures.     |                    |  |  |   |             |         |                           |