

| | | | |
|--|--|--|--|
| No. W 109320 | Due no later than Dec 31, 2016 Annual Report Form | | 2. Registered Agent and Office (NOT A P.O. BOX) JACK E DENNY 825 OLD HWY 95 PLUMMER ID 83851-9778 |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. RIDPATH 1 LLC 825 OLD HIGHWAY 95 PLUMMER ID 83851 | | 3. <u>New</u> Registered Agent Signature. |

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code |
|---|----------------|----------------------|----------|-------|---------|-------------|
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Jack E. Denny, | 825 Old Highway 95, | Plummer, | Id. | USA | 83851 |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |

| | | | | | |
|---|---|--------------------------------|-----------------------|--|-----------------------|
| 5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 109320 </div> | 6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> Signature: <u>Jack E Denny</u> </td> <td style="width: 40%; padding: 5px;"> Date: <u>11-29-16</u> </td> </tr> <tr> <td style="padding: 5px;"> Name (type or print): <u>Jack E. Denny</u> </td> <td style="padding: 5px;"> Title: <u>Manager</u> </td> </tr> </table> | Signature: <u>Jack E Denny</u> | Date: <u>11-29-16</u> | Name (type or print): <u>Jack E. Denny</u> | Title: <u>Manager</u> |
| Signature: <u>Jack E Denny</u> | Date: <u>11-29-16</u> | | | | |
| Name (type or print): <u>Jack E. Denny</u> | Title: <u>Manager</u> | | | | |

Issued 11/22/2016 by CLH
123724

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM