

|  |                 |   |           |   |         |             |  |
|--|-----------------|---|-----------|---|---------|-------------|--|
| No. <b>W 173071</b>  |                 | <b>Due no later than Oct 31, 2017</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>1. Mailing Address: Correct in this box if needed.</b><br><br>THI HOLDINGS, LLC<br>312 S FIRST AVE<br>SANDPOINT ID 83864 |           | ANDREW T PLATTE<br>312 S FIRST AVE<br>SANDPOINT ID 83864-8386 |         |             |  |
|  |                 |   |           | 3. <u>New</u> Registered Agent Signature:*                    |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |                 |   |           |   |         |             |  |
| Office Held  | Name            | Street or PO Address  | City      | State   | Country | Postal Code |  |
| MEMBER   | BRIAN JORGENSON | 282 FAWN GULLY DRIVE  | SANDPOINT | ID  | USA     | 83864       |  |
| MEMBER   | AMMY JORGENSON  | 282   | SANDPOINT | ID  | USA     | 83864       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 173071</b>  |                 | 6. Annual Report must be signed.*<br>Signature: andrew platte<br>Name (type or print): andrew platte                        |           |   |         |             |  |
|  |                 | Date: 08/18/2017<br>Title: cpa  |           |   |         |             |  |
| Processed 08/18/2017   |                 | * Electronically provided signatures are accepted as original signatures.   |           |   |         |             |  |