

|  |                |  |          |  |                     |
|--|----------------|--|----------|--|---------------------|
| No. <b>W 47758</b>   |                | <b>Due no later than Feb 28, 2018</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>Annual Report Form</b>  |          | GREGG D ONEIDA<br>110 E 450 N<br>SHOSHONE ID 83352 |                     |
|  |                | <b>1. Mailing Address: Correct in this box if needed.</b><br>ONEIDA TILE LLC<br>TRACY K ONEIDA<br>110 E 450 N<br>SHOSHOSNE 592287606 83352 |          | 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 |
| MANAGER  | GREGG D ONEIDA | 110 E 450 N  | SHOSHONE | 592287606  | 88335               |
| MANAGER  | TRACY K ONEIDA | 110 E 450 N  | SHOSHONE | 592287606  | 83352               |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |          |  |                     |
| <b>ID<br/>W 47758</b>  |                | Signature: Tracy K Oneida  |          | Date: 01/16/2018                                   |                     |
|  |                | Name (type or print): Tracy K Oneida   |          | Title: Secretary                                   |                     |
| Processed 01/16/2018   |                | * Electronically provided signatures are accepted as original signatures.  |          |  |                     |