

|  |                 |  |            |  |                     |
|--|-----------------|--|------------|--|---------------------|
| No. <b>W 84293</b>   |                 | <b>Due no later than May 31, 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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>FIX IT BOOKKEEPING, LLC<br>HOLLY FILKINS<br>1754 N IVORY LN<br>POST FALLS ID 83854-0124<br>USA |            | HOLLY FILKINS<br>1754 N IVORY LN<br>POST FALLS ID 83854-0124 |                     |
|  |                 |  |            | 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   | HOLLY F FILKINS | 1754 N IVORY LN  | POST FALLS | ID   | USA 83854-0124      |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 84293</b>   |                 | 6. Annual Report must be signed.*<br>Signature: Holly Filkins<br>Name (type or print): Holly Filkins<br>Date: 06/09/2018<br>Title: Member  |            |  |                     |
| Processed 06/09/2018   |                 | * Electronically provided signatures are accepted as original signatures.  |            |  |                     |