| No. C 113865  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |  | Due no later than Feb 28, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  JUSTIN HUGHES, INC. JUSTIN HUGHES PO BOX 343 129 S 2ND W TETON CITY ID 83451 USA |                        | 2. Registered Agent and Address (NO PO BOX)  JUSTIN HUGHES  129 S 2ND W  TETON CITY ID 83451  3. New Registered Agent Signature:* |                  |    |     |   |      |  |                      |  |      |       |         |             |
|--|--|---|------------------------|---|------------------|----|-----|---|------|--|----------------------|--|------|-------|---------|-------------|
|  |  |   |                        |   |                  |    |     | 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). |      |  |                      |  |      |       |         |             |
|  |  |   |                        |   |                  |    |     | Office Held   | Name |  | Street or PO Address |  | City | State | Country | Postal Code |
| PRESIDENT JUSTIN HUGHES  |  | HES   | PO BOX 343 129 S 2ND W |   | TETON CITY       | ID | USA | 83451   |      |  |                      |  |      |       |         |             |
| 5. Organized Under the Laws of:  |  | 6. Annual Report must be signed.*   |                        |   |                  |    |     |   |      |  |                      |  |      |       |         |             |
| ID   |  | Signature: Justin Hughes  |                        |   | Date: 01/16/2017 |    |     |   |      |  |                      |  |      |       |         |             |
| C 113865   |  | Name (type or print): Justin Hughes   |                        |   | Title: President |    |     |   |      |  |                      |  |      |       |         |             |
| Processed 01/16/2017 * Electronically provided signatures are accepted as original signatures.   |  |   |                        |   |                  |    |     |   |      |  |                      |  |      |       |         |             |