| No. W 130657 | | Due no later than Oct 31, 2017 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------|---|--|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | NATIONAL REGISTERED AGENTS INC | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. WILDERNESS TRAINING & CONSULTING,LLC WAYNE LAIRD 530 CENTER STREET NE SUITE 700 | | 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Fater Nar | | SALEM OR 97301 mes and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | ines and Addresse: | Street or PO Address | City | State | Country | Postal Code |
| MANAGER | STEVEN ST | RADLEY | 530 CENTER STREET NE STE 700 | SALEM | OR | USA | 97301 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| OR W 130657 | | Signature: Wayne Laird | | Date: 10/10/2017 | | | |
| | | Name (type or | Title: Member | | | | |
| Processed 10/10/2017 | 7 | * Electronically pr | ovided signatures are accepted as original sig | natures. | | | |