| No. W 111070 Return to: | | Due no later than Feb 29, 2016 Annual Report Form | | 2 | 2. Registered Agent and Address (NO PO BOX) THOMAS J HALVERSON | | | |
|--|--------------|---|--------------------------------------|---|---|-------|---------|-------------|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. GEM STATE ARMORY, LLC THOMAS J HALVERSON 630 MATCHPOINT DR IDAHO FALLS ID 83406 | | | 630 MATCHPOINT DR IDAHO FALLS ID 83406 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compani | es: Enter Na | mes and Addresses | s of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| MANAGER | THOMAS J | HALVERSON | 630 MATCHPOINT DR. | | IDAHO FALLS | ID | USA | 83406 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Thomas Halverson | | | Date: 12/21/2015 | | | |
| W 111070 | | Name (type or print): Thomas Halverson | | | Title: Manager | | | |
| Processed 12/21/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |