

|                                                                                                                                                        |                |                                                                                                                                                               |          |                                                           |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------|---------|-------------|--|
| No. <b>C 145470</b>                                                                                                                                    |                | <b>Due no later than Sep 30, 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>1. Mailing Address: Correct in this box if needed.</b><br><br>MICHEL EMERGENCY SERVICES, INC.<br>LARRY MICHEL<br>3204 S WISCONSIN AVE<br>CALDWELL ID 83605 |          | LARRY MICHEL<br>3204 S WISCONSIN AVE<br>CALDWELL ID 83605 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                               |          | 3. <u>New</u> 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                                                                                                                                              | LARRY D MICHEL | 3204 WISCONSIN AVE                                                                                                                                            | CALWELL  | ID                                                        | USA     | 83605       |  |
| SECRETARY                                                                                                                                              | DONNA J MICHEL | 3204 WISCONSIN AVE                                                                                                                                            | CALDWELL | ID                                                        | USA     | 83605       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 145470</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Larry Michel<br>Name (type or print): Larry Michel                                                            |          |                                                           |         |             |  |
|                                                                                                                                                        |                | Date: 08/01/2018<br>Title: President                                                                                                                          |          |                                                           |         |             |  |
| Processed 08/01/2018                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                     |          |                                                           |         |             |  |