| No. W 84049 | | Due no later than May 31, 2018 | | 2 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|----------------------|---|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | | CHAD E LONGSON | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. LGI THREE LLC CHAD LONGSON 2615 E ASPENWOOD CT EAGLE ID 83616 | | | 2615 E ASPENWOOD CT EAGLE ID 83616 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 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 |
| MANAGER CHAD LONG | | SON | 2615 E ASPENWOOD CT | | EAGLE | ID | USA | 83616 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Chad Longson | | | Date: 03/20/2018 | | | |
| W 84049 | | Name (type or print): Chad Longson | | | Title: Manager | | | |
| Processed 03/20/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |