

|  |   |   |  |       |         |             |
|--|---|---|--|-------|---------|-------------|
| No. <b>W 91138</b>   | <b>Due no later than Mar 31, 2016</b><br><b>Annual Report Form</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>TOTO II, LLC<br>W DARROW FIEDLER<br>4961 N HOLLOW LN<br>BOISE ID 83702 |   | E DON COPPLE<br>199 N CAPITAL BLVD STE 600<br>BOISE ID 83702 |       |         |             |
|  |   |   | 3. <u>New</u> Registered Agent Signature:*                   |       |         |             |
| 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  | W DARROW FIEDLER  | 4961 N HOLLOW LN  | BOISE  | ID    | USA     | 83702       |
| MANAGER  | PASSIVE INCOME INC.   | 4961 N HOLLOW LN  | BOISE  | ID    | USA     | 83702       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 91138</b>   | 6. Annual Report must be signed.*<br>Signature: W Darrow Fiedler<br>Name (type or print): W Darrow Fiedler                              |   | Date: 01/27/2016<br>Title: manager                           |       |         |             |
| Processed 01/27/2016   |   | * Electronically provided signatures are accepted as original signatures. |  |       |         |             |