

|                                                                                                                                                        |               |                                                                                                                                      |          |                                                      |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------|---------|-------------|--|
| No. <b>W 124481</b>                                                                                                                                    |               | Due no later than Apr 30, 2015                                                                                                       |          | 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>MINUS174 LLC<br>DALE E REISER<br>2272 W TRESTLE DR<br>MERIDIAN ID 83646 |          | DALE E REISER<br>2272 W TRESTLE DR<br>MERIDIAN 83646 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                      |          | 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 |  |
| MEMBER                                                                                                                                                 | DALE E REISER | 2272 W TRESTLE DR                                                                                                                    | MERIDIAN | ID                                                   | USA     | 83646       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 124481</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Dale Reiser<br>Name (type or print): Dale Reiser<br>Date: 04/16/2015<br>Title: CTO   |          |                                                      |         |             |  |
| Processed 04/16/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                            |          |                                                      |         |             |  |