| No. W 163075 | | Due no later than Feb 28, 2017 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|---|---|-------|---------|-------------|
| Return to: | | Annual Report Form | BRETT G LOPEZ | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. ATLAS SMOKEHOUSE, LLC BRETT LOPEZ 618 N 13 POCATELLO ID 83201 | 618 N 13 POCATELLO ID 83201-8320 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 N | Name | Street or PO Address | City | State | Country | Postal Code |
| MEMBER BRETT LOPE | | Z 618 N 13 | POCATELLO | ID | USA | 83201 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ID | | Signature: Brett Lopez | Date: 03/17/2017 | | | |
| W 163075 | | Name (type or print): Brett Lopez | Title: Owner | | | |
| Processed 03/17/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | |