

| | | | | | | | |
|--|--------------|--|-------|---|---------|-------------|--|
| No. C 204372 | | Due no later than Dec 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. CHO2 INC. DAVE TORELL 5531 N MITCHELL ST BOISE ID 83704 | | TRAVIS PERRY 1300 E STATE ST STE 103 EAGLE ID 83616 | | | |
| | | | | 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 | |
| SECRETARY | DIANE TORELL | 5531 N MITCHELL ST | BOISE | ID | USA | 83704 | |
| PRESIDENT | DAVE TORELL | 5531 N MITCHELL ST | BOISE | ID | USA | 83704 | |
| 5. Organized Under the Laws of: ID C 204372 | | 6. Annual Report must be signed.* Signature: David J Torell Name (type or print): David J Torell Date: 01/23/2017 Title: President/CEO | | | | | |
| Processed 01/23/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | |