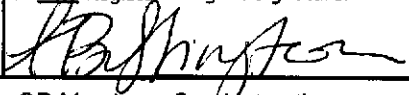
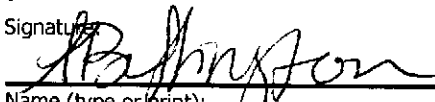


<b>No. W 119026</b>	<b>Due no later than Nov 30, 2014</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> ANNALEE PHILLIPS 617 N 1200 W BLACKFOOT ID 83221																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> PHILCO LOGISTICS LLC LESLIE STODDARD 774 N 1200 W BLACKFOOT ID 83221 USA		<b>3. <u>New</u> Registered Agent Signature.</b> 																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 25%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Andrea Buffington</td> <td>602 N. S.E.</td> <td>Smithfield</td> <td>UT</td> <td>USA</td> <td>84335</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Andrea Buffington	602 N. S.E.	Smithfield	UT	USA	84335	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold; margin-top: 20px;">             IDAHO              W 119026           </div>		<b>6.</b> Signature:  <hr/> Name (type or print): Andrea Buffington <hr/> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>Date:</b>          10/8/14       </div> <div style="width: 35%;"> <b>Title:</b>          manager       </div> </div>																																				
Issued 10/01/2014 by DK1 <span style="float: right;">123111</span>																																						