| No. <b>W 156117</b> Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |           | Du   | 2. Registered                                 | 2. Registered Agent and Address (NO PO BOX) |   |         |             |  |
|---|-----------|--|---|---|---|---------|-------------|--|
|   |           | Annual Report Form  1. Mailing Address: Correct in this box if needed.  HUDSON TRAINING CENTER LLC  KATHERINE J HUDSON  6238 S LONE TREE AVE  BOISE ID 83709 |   | 1900 NORT<br>COEUR D A                      | REGISTERED AGENTS INC 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83709-8370  3. New Registered Agent Signature:* |         |             |  |
| NO FILING<br>RECEIVED BY I<br>4. Limited Liability Con  | DUE DATE  | USA<br>mes and Addresse  | s of at least one Member or Manager.          |   |   |         |             |  |
| Office Held   | Name      |  | Street or PO Address                          | City  | State   | Country | Postal Code |  |
| MANAGER   | KATHERINE | J HUDSON   | 6238 S LONE TREE AVE                          | BOISE                                       | ID  | USA     | 83709       |  |
| 5. Organized Under the Laws of:   |           | 6. Annual Report must be signed.*  |   |   |   |         |             |  |
| ID<br>W 156117  |           | Signature: Katherine J Hudson  |   |   | Date: 09/13/2016  |         |             |  |
|   |           | Name (type or  |   | Title: Owner/Trainer                        |   |         |             |  |
| Processed 09/13/2016  | ,         | * Electronically pr  | ovided signatures are accepted as origination | al signatures.                              |   |         |             |  |