

|  |                           |   |  |   |             |         |                      |
|--|---------------------------|---|--|---|-------------|---------|----------------------|
| No. <b>W 39890</b>   |                           | <b>Due no later than May 31, 2018</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )      |             |         |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                           | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>PHILLIPPI, LLC<br>WILBUR C ANDERSON<br>21326 OLENA WAY<br>CALDWELL ID 83607                        |  | WILBUR C ANDERSON<br>21326 OLENA WAY<br>CALDWELL ID 83607 |             |         |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                           |   |  | 3. <u>New</u> Registered Agent Signature:*                |             |         |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                           |   |  |   |             |         |                      |
| Office Held<br>MEMBER  | Name<br>EDGAR M THRIFT JR | Street or PO Address<br>1550 PROSPECT AVE   |  | City<br>CAPITOLA  | State<br>CA | Country | Postal Code<br>95010 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 39890</b>                                 |                           | 6. Annual Report must be signed.*<br><br>Signature: Wilbur C Anderson<br>Name (type or print): Wilbur C Anderson<br><br>Date: 03/19/2018<br>Title: Registered Agent |  |   |             |         |                      |
| Processed 03/19/2018 * Electronically provided signatures are accepted as original signatures.     |                           |   |  |   |             |         |                      |