| No. <b>W 149384</b>  |                | Due no later than Mar 31, 2016  |                                       | 2. | 2. Registered Agent and Address (NO PO BOX)                                |       |         |             |
|--|----------------|---|---------------------------------------|----|--|-------|---------|-------------|
| Return to:   |                | Annual Report Form  |                                       |    | CASEY MONSON   |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |                | 1. Mailing Address: Correct in this box if needed.  RIVER VALLEY HOME INSPECTIONS, LLC CASEY MONSON PO BOX 382 BLACKFOOT ID 83221 |                                       |    | 582 NORTH 100 EAST BLACKFOOT ID 83221  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                |   |                                       |    |  |       |         |             |
| 4. Limited Liability Compa   | nies: Enter Na | mes and Addresse  | es of at least one Member or Manager. |    |  |       |         |             |
| Office Held  | Name           |   | Street or PO Address                  |    | City   | State | Country | Postal Code |
| MANAGER  | CASEY V M      | IONSON  | 582 NORTH 100 EAST                    | I  | BLACKFOOT  | ID    | USA     | 83221       |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*   |                                       |    |  |       |         |             |
| ID   |                | Signature: Casey monson   |                                       |    | Date: 04/17/2016   |       |         |             |
| W 149384   |                | Name (type or print): Casey monson  |                                       |    | Title: Owner   |       |         |             |
| Processed 04/17/2016 * Electronically provided signatures are accepted as original signatures. |                |   |                                       |    |  |       |         |             |