| No. C 208080 | | Due no later than Dec 31, 2016 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|--|----------------------|--------------------|---|---------|-------------|--|
| Return to: | | Annual Report Form | | 10 100001 0 10000 | RYAN BISHOP | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. RA BISHOP P.A. RYAN BISHOP 1151 CONNOR CT KIMBERLY ID 83341 | | KIMBERLY | 1151 CONNOR CT KIMBERLY ID 83341 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | J. <u>New</u> Regi | 5. <u>1.61.</u> Register od Agent englidetter | | | |
| 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 | |
| DIRECTOR RYAN JACOB | | BISHOP | 1151 CONNOR CT. | KIMBERLY | ID | USA | 83341 | |
| SECRETARY AMANDA MC | | DYES BISHOP | 1151 CONNOR CT. | KIMBERLY | ID | USA | 83341 | |
| PRESIDENT | RYAN JACOB BISHOP | | 1151 CONNOR CT. | KIMBERLY | ID | USA | 83341 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must | | | | | | |
| ID | | Signature: Ryan Bishop | | | Date: 01/26/2017 | | | |
| C 208080 | | Name (type or print): Ryan Bishop | | | Title: President | | | |
| Processed 01/26/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |