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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>W 156571</b>                                                                                                                                    |                 | <b>Due no later than Sep 30, 2016</b>                                                                                                               |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>SANDO RESIDENTIAL PROPERTIES, LLC<br>REBECKA S SANDO<br>PO BOX 1898<br>HAYDEN ID 83835 |        | WILLIAM J SANDO<br>8810 N DAVIS CIR<br>HAYDEN ID 83835-8383 |         |                  |  |
|                                                                                                                                                        |                 |                                                                                                                                                     |        | 3. <u>New</u> Registered Agent Signature:*                  |         |                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                 |                                                                                                                                                     |        |                                                             |         |                  |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                | City   | State                                                       | Country | Postal Code      |  |
| MANAGER                                                                                                                                                | REBECKA S SANDO | 8810 N. DAVIS CIR                                                                                                                                   | HAYDEN | ID                                                          | USA     | 83835            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                   |        |                                                             |         |                  |  |
| <b>ID<br/>W 156571</b>                                                                                                                                 |                 | Signature: Rebecka Sando                                                                                                                            |        |                                                             |         | Date: 08/02/2016 |  |
|                                                                                                                                                        |                 | Name (type or print): Rebecka Sando                                                                                                                 |        |                                                             |         | Title: Manager   |  |
| Processed 08/02/2016                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                           |        |                                                             |         |                  |  |