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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------|---------|-------------------------|--|
| No. <b>C 153109</b>                                                                                                                                    |                  | <b>Due no later than Feb 28, 2014</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><br>FRONTLINE WHOLESALE, INC.<br>EDWIN L. LITTEN<br>322 MAIN ST<br>LEWISTON ID 83501 |            | EDWIN L. LITTENEKER<br>322 MAIN ST<br>LEWISTON ID 83501 |         |                         |  |
|                                                                                                                                                        |                  |                                                                                                                                                   |            | 3. <u>New</u> Registered Agent Signature:*              |         |                         |  |
| 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             |  |
| PRESIDENT                                                                                                                                              | MARCUS VALLIANT  | 4632 E. MOSSBERG CIRCLE                                                                                                                           | POST FALLS | ID                                                      | USA     | 83854                   |  |
| TREASURER                                                                                                                                              | PATRICK VALLIANT | 4632 E. MOSSBERG CIRCLE                                                                                                                           | POST FALLS | ID                                                      | USA     | 83854                   |  |
| SECRETARY                                                                                                                                              | TRAVIS W SPIKER  | 780 N THORNTON                                                                                                                                    | POST FALLS | ID                                                      | USA     | 83854                   |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                 |            |                                                         |         |                         |  |
| <b>ID<br/>C 153109</b>                                                                                                                                 |                  | Signature: Edwin L. Litteneker                                                                                                                    |            |                                                         |         | Date: 02/07/2014        |  |
|                                                                                                                                                        |                  | Name (type or print): Edwin L. Litteneker                                                                                                         |            |                                                         |         | Title: Registered Agent |  |
| Processed 02/07/2014                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                         |            |                                                         |         |                         |  |