

|  |                     |   |            |  |         |             |  |
|--|---------------------|---|------------|--|---------|-------------|--|
| No. <b>W 150755</b>  |                     | <b>Due no later than Apr 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>INTERSECTIO MARKETING SOLUTIONS LLC<br>JACOB VEAN WOODBREY<br>401 HAWTHORNE ST<br>PINEHURST ID 83850 |            | JACOB WOODBREY<br>401 HAWTHORNE ST<br>PINEHURST ID 83850 |         |             |  |
|  |                     |   |            | 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  | JACOB VEAN WOODBREY | 935 N TUBSGATE PL APT 31  | POST FALLS | ID   | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 150755</b>  |                     | 6. Annual Report must be signed.*<br>Signature: Jacob Woodbrey<br>Name (type or print): Jacob Woodbrey<br>Date: 03/22/2016<br>Title: President/CEO                |            |  |         |             |  |
| Processed 03/22/2016   |                     | * Electronically provided signatures are accepted as original signatures.   |            |  |         |             |  |