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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------|---------------------|
| No. <b>W 35862</b>                                                                                                                                     |            | <b>Due no later than Jan 31, 2017</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>FUNK-DRUSSEL, LLC<br>GARY WIGHT<br>5990 GLENEAGLES DR<br>IDAHO FALLS ID 83401 |             | GARY WIGHT<br>5990 GLENEAGLES DR<br>IDAHO FALLS ID 83401 |                     |
|                                                                                                                                                        |            |                                                                                                                                                                                 |             | 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                                                                                                                                                | GARY WIGHT | 5990 GLENEAGLES DR                                                                                                                                                              | IDAHO FALLS | ID                                                       | 83401               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 35862</b>                                                                                           |            | 6. Annual Report must be signed.*<br>Signature: Gary Wight<br>Name (type or print): Gary Wight<br>Date: 01/11/2017<br>Title: manager                                            |             |                                                          |                     |
| Processed 01/11/2017                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                                                       |             |                                                          |                     |