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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------------------|
| No. <b>W 10920</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>                                                                                                                |       | MICHAEL L RISHEL<br>10235 JAY RD<br>BOISE ID 83714 |                     |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>KARMICHAEL L.L.C.<br>MICHAEL L RISHEL<br>10235 JAY RD<br>BOISE ID 83714 |       | 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 |
| MEMBER                                                                                                                                                 | MICHAEL L RISHEL | 10235 JAY ROAD                                                                                                                           | BOISE | ID                                                 | 83714               |
| MEMBER                                                                                                                                                 | KARI C RISHEL    | 10235 JAY ROAD                                                                                                                           | BOISE | ID                                                 | 83714               |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                        |       |                                                    |                     |
| <b>ID<br/>W 10920</b>                                                                                                                                  |                  | Signature: Michael L Rishel                                                                                                              |       | Date: 11/20/2016                                   |                     |
|                                                                                                                                                        |                  | Name (type or print): Michael L Rishel                                                                                                   |       | Title: Member                                      |                     |
| Processed 11/20/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                |       |                                                    |                     |