| No. W 77947 | Due no later than Sep 30, 2018 | | 2 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--|-----------------------------------|---|---|-------|---------|-------------|
| Return to: | Annual Report Form | | | ROBERT D CLEMENTS 56 PLEASANT ACRES DRIVE MCCALL ID 83638 | | | |
| SECRETARY OF STATE | 1. Mailing Address: Correct in this box if needed. | | 1 | | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | REGULATORY CONSULTING SERVICES, LLC ROBERT D. CLEMENTS P.O. BOX 3008 MCCALL ID 83638 USA | | | | | | |
| | | | 3 | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Enter Na | mes and Addresses o | f at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | | City | State | Country | Postal Code |
| MEMBER ROBERT D. | CLEMENTS | P.O. BOX 3008 | | MCCALL | ID | USA | 83638 |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | | | | | | |
| ID | Signature: Robert D. Clements | | | Date: 07/31/2018 | | | |
| W 77947 | Name (type or print): Robert D. Clements | | | Title: Member | | | |
| Processed 07/31/2018 | * Electronically provided signatures are accepted as original signatures. | | | | | | |