

|  |              |  |       |   |         |             |  |
|--|--------------|--|-------|---|---------|-------------|--|
| No. <b>W 20365</b>   |              | <b>Due no later than Aug 31, 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SHIPPRO, L.L.C.<br>DANE E CROFT<br>3270 EAST 17TH STREET<br>AMMON ID 83406 |       | DANE E CROFT<br>3270 EAST 17TH STREET<br>AMMON ID 83406 |         |             |  |
|  |              |  |       | 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   | DANE E CROFT | 3270 E 17TH STREET   | AMMON | ID  | USA     | 83406       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 20365</b>   |              | 6. Annual Report must be signed.*<br>Signature: Dane E. Croft<br>Name (type or print): Dane E. Croft<br>Date: 08/03/2016<br>Title: member                                    |       |   |         |             |  |
| Processed 08/03/2016   |              | * Electronically provided signatures are accepted as original signatures.  |       |   |         |             |  |