

|                                                                                                                                                        |             |                                                                                                                                                                                     |       |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 166422</b>                                                                                                                                    |             | Due no later than May 31, 2017                                                                                                                                                      |       | 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>TWELVE DISCIPLES, LLC<br>BRIAN LEE TIBBS<br>4800 W FAIRVIEW AVE<br>BOISE ID 83706 |       | BRIAN LEE TIBBS<br>4800 W FAIRVIEW AVE<br>BOISE ID 83706 |         |             |  |
|                                                                                                                                                        |             |                                                                                                                                                                                     |       | 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                                                                                                                                                | BRIAN TIBBS | 4800 W FAIRVIEW AVE                                                                                                                                                                 | BOISE | ID                                                       | USA     | 83706       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 166422</b>                                                                                          |             | 6. Annual Report must be signed.*<br>Signature: Whitney Smith<br>Name (type or print): Whitney Smith<br>Date: 05/08/2017<br>Title: Bookkeeper                                       |       |                                                          |         |             |  |
| Processed 05/08/2017                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                                           |       |                                                          |         |             |  |