

| | | | | | | |
|--|--|---|---|-------|---------|-------------|
| No. W 12820 | Due no later than Aug 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | LOUIS SKAAR & SONS, INC. 421 N 3200 E LEWISVILLE ID 83431 | | | |
| | SKAAR BROTHERS, L.L.C. DUWAYNE SKAAR 421 N 3200 E LEWISVILLE ID 83431 | | 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 | DUWAYNE SKAAR | 3273 E. 500 N | LEWISVILLE | ID | | 83431 |
| MEMBER | JUSTIN SKAAR | 454 N. 3700 E. | RIGBY | ID | USA | 83442 |
| 5. Organized Under the Laws of: ID W 12820 | | 6. Annual Report must be signed.* Signature: DuWayne Skaar Name (type or print): DuWayne Skaar Date: 07/27/2017 Title: Member | | | | |
| Processed 07/27/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | |