

|                                                                                                                                                        |              |                                                                                                                                               |             |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 68747</b>                                                                                                                                     |              | Due no later than Jan 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>1. Mailing Address: Correct in this box if needed.</b><br><br>DAVIS PLASTERING, INC.<br>BART DAVIS<br>13275 N 55 E<br>IDAHO FALLS ID 83401 |             | BART DAVIS<br>13275 N 55 E<br>IDAHO FALLS ID 83401 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                               |             | 3. <u>New</u> Registered Agent Signature:*         |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |              |                                                                                                                                               |             |                                                    |         |             |  |
| Office Held                                                                                                                                            | Name         | Street or PO Address                                                                                                                          | City        | State                                              | Country | Postal Code |  |
| SECRETARY                                                                                                                                              | SHEILA DAVIS | 13275N 55E                                                                                                                                    | IDAHO FALLS | ID                                                 | USA     | 83401       |  |
| PRESIDENT                                                                                                                                              | BART J DAVIS | 13275N 55E                                                                                                                                    | IDAHO FALLS | ID                                                 | USA     | 83401       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 68747</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Sheila Davis<br>Name (type or print): Sheila Davis                                            |             |                                                    |         |             |  |
|                                                                                                                                                        |              | Date: 12/21/2016<br>Title: Secretary                                                                                                          |             |                                                    |         |             |  |
| Processed 12/21/2016                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                     |             |                                                    |         |             |  |