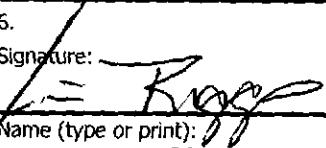


<p>No. W 158008</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>NO FILING FEE IF RECEIVED BY DUE DATE</p>		<p>Due no later than Nov 30, 2017 Annual Report Form</p> <p>1. Mailing Address: Correct in this box if needed. EXTREME BUILDERS, LLC. 4200 PHILBIN LOT 42 POCATELLO ID 83202</p>		<p>2. Registered Agent and Office (NOT A P.O. BOX) JIM NEIL RIGGS 4200 PHILBIN LOT 42 POCATELLO ID 83202</p> <p>3. New Registered Agent Signature.</p>																																				
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6">JIM NEIL RIGGS 4200 PHILBIN LOT 42 POCATELLO ID 83202</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	JIM NEIL RIGGS 4200 PHILBIN LOT 42 POCATELLO ID 83202						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of: IDAHO W 158008</p>		<p>6.</p> <p>Signature: </p> <p>Name (type or print): <u>JIM RIGGS</u></p> <p>Date: <u>12-26-2017</u></p> <p>Title: <u>OWNER</u></p>																																						