

|                                                                                                                                                        |                 |                                                                                                                                                  |           |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 77652</b>                                                                                                                                     |                 | <b>Due no later than Sep 30, 2018</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>1. Mailing Address: Correct in this box if needed.</b><br><br>J&M NELSON, L.L.C.<br>JAMES P NELSON<br>140 S 18TH AVE<br>POCATELLO ID 83201    |           | JAMES P NELSON<br>140 S 18TH AVE<br>POCATELLO ID 83201 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                  |           | 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                                                                                                                                                | JAMES P. NELSON | 140 SOUTH 18TH AVENUE                                                                                                                            | POCATELLO | ID                                                     | USA     | 83201-3303  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 77652</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: James P. Nelson<br>Name (type or print): James P. Nelson<br>Date: 07/30/2018<br>Title: President |           |                                                        |         |             |  |
| Processed 07/30/2018                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                        |           |                                                        |         |             |  |