

|                                                                                                                                                        |            |                                                                                                                                                     |             |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 129417</b>                                                                                                                                    |            | <b>Due no later than Sep 30, 2016</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>P & P REAL ESTATE, LLC<br>GARY R WIGHT<br>930 PIER VIEW DR<br>IDAHO FALLS ID 83402 |             | GARY R WIGHT<br>930 PIER VIEW DR<br>IDAHO FALLS ID 83402 |         |             |  |
|                                                                                                                                                        |            |                                                                                                                                                     |             | 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                                                                                                                                                 | GARY WIGHT | 930 PIER VIEW DR                                                                                                                                    | IDAHO FALLS | ID                                                       | USA     | 83402       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 129417</b>                                                                                          |            | 6. Annual Report must be signed.*<br>Signature: Gary R. Wight<br>Name (type or print): Gary R. Wight                                                |             |                                                          |         |             |  |
| Date: 07/26/2016<br>Title: registered agent                                                                                                            |            |                                                                                                                                                     |             |                                                          |         |             |  |
| Processed 07/26/2016                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                           |             |                                                          |         |             |  |