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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------|---------|-------------|
| No. <b>W 174966</b>                                                                                                                                    | <b>Due no later than Dec 31, 2017</b><br><b>Annual Report Form</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>           |                                                                                                                                      | JOANNA CORD<br>1310 E LOCUST AVE<br>COEUR D ALENE ID 83814-8381 |       |         |             |
|                                                                                                                                                        | CORD LLC<br>CORD LLC<br>1310 E LOCUST AVE<br>COEUR D ALENE ID 83814 |                                                                                                                                      | 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                                                                                                                                                | JOANNA E CORD                                                       | 1310                                                                                                                                 | COEUR D ALENE                                                   | ID    | USA     | 83814       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 174966</b>                                                                                    |                                                                     | 6. Annual Report must be signed.*<br>Signature: Joanna Cord<br>Name (type or print): Joanna Cord<br>Date: 01/03/2018<br>Title: owner |                                                                 |       |         |             |
| Processed 01/03/2018                                                                                                                                   |                                                                     | * Electronically provided signatures are accepted as original signatures.                                                            |                                                                 |       |         |             |