

|  |               |  |         |  |         |                  |  |
|--|---------------|--|---------|--|---------|------------------|--|
| No. <b>C 193786</b>  |               | <b>Due no later than Feb 28, 2017</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>DJC FLOORING INSTALLATION, INC.<br>HAYES MANAGEMENT SERVICES<br>890 OXFORD DR<br>IDAHO FALLS ID 83401 |         | CHRIS HAYES<br>890 OXFORD DR<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      |  |
| PRESIDENT  | DOUGLAS CLINE | 694 EAST 1400 NORTH  | SHELLEY | ID   | USA     | 83274            |  |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*  |         |  |         |                  |  |
| <b>ID<br/>C 193786</b>   |               | Signature: Douglas Cline   |         |  |         | Date: 01/06/2017 |  |
|  |               | Name (type or print): Douglas Cline  |         |  |         | Title: President |  |
| Processed 01/06/2017   |               | * Electronically provided signatures are accepted as original signatures.  |         |  |         |                  |  |