| No. <b>W 64138</b>   | Due no later than Jun 30, 2018  | 2. Registered Agent and Address (NO PO BOX) |                     |         |             |
|--|---|---|---------------------|---------|-------------|
| Return to:   | Annual Report Form  | LEWIS PATRICK                               |                     |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed.                        | 32607 HWY 200<br>SANDPOINT ID 83864         |                     |         |             |
|  | SANDPOINT STORAGE SOLUTIONS, LLC<br>LEWIS PATRICK<br>32607 HWY 200        | 3/11/5/ 01/11                               | SANDI GIVI ID 05001 |         |             |
|  | SANDPOINT ID 83864  | 3. <u>New</u> Registered Agent Signature:*  |                     |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |                     |         |             |
| 4. Limited Liability Companies: Enter N  | ames and Addresses of at least one Member or Manager.                     |   |                     |         |             |
| Office Held Name   | Street or PO Address  | City  | State               | Country | Postal Code |
| MANAGER LEWIS PAT  | SCOTTSDALE  | AZ  | USA                 | 85267   |             |
| 5. Organized Under the Laws of:  | 6. Annual Report must be signed.*   |   |                     |         |             |
| ID   | Signature: Lewis Patrick  | Date: 04/27/2018                            |                     |         |             |
| W 64138  | Name (type or print): Lewis Patrick                                       | Title: Manager                              |                     |         |             |
| Processed 04/27/2018   | * Electronically provided signatures are accepted as original signatures. |   |                     |         |             |