| No. W 140641 | | Due no later than Jul 31, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------------|---|---|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | ORVAL BRENT ABBOTT | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Addr BRENT AND VICKE BRENT ABBOTT PO BOX 60 SWAN LAKE ID 8 | 33023 S STOCKTON RD SWAN LAKE ID 83281 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 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 | ORVAL BREN | NT ABBOTT | 33023 S STOCKTON RD P O BOX 60 | SWAN LAKE | ID | USA | 83281 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: ORVAL | Date: 08/14/2015 | | | | |
| W 140641 | | Name (type or pri | Title: MANAGER | | | | |
| Processed 08/14/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |