

|  |                 |   |       |  |         |             |  |
|--|-----------------|---|-------|--|---------|-------------|--|
| No. <b>W 125357</b>  |                 | Due no later than May 31, 2017  |       | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>MAD RIVER, LLC<br>KEVIN E. DINIUS<br>5680 E FRANKLIN RD STE 130<br>NAMPA ID 83687 |       | KEVIN E DINIUS<br>5680 E FRANKLIN RD STE 130<br>NAMPA ID 83687 |         |             |  |
|  |                 |   |       | 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   | JULIE SCHELHORN | 9135 SKY RANCH RD.  | NAMPA | ID   | USA     | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 125357</b>  |                 | 6. Annual Report must be signed.*<br>Signature: Kevin E. Dinius<br>Name (type or print): Kevin E. Dinius<br>Date: 04/07/2017<br>Title: Registered Agent                             |       |  |         |             |  |
| Processed 04/07/2017   |                 | * Electronically provided signatures are accepted as original signatures.   |       |  |         |             |  |