

|                                                                                                                                                        |             |                                                                                                                                               |        |                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------|---------|-------------|--|
| No. <b>W 9055</b>                                                                                                                                      |             | <b>Due no later than Jun 30, 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>GROPP LLC<br>SCOTT GROPP<br>PO BOX 8929<br>MOSCOW ID 83843<br>USA            |        | SCOTT GROPP<br>225 WEST A STREET<br>MOSCOW ID 83843 |         |             |  |
|                                                                                                                                                        |             |                                                                                                                                               |        | 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                                                                                                                                                | SCOTT GROPP | P O BOX 8929                                                                                                                                  | MOSCOW | ID                                                  | USA     | 83843       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 9055</b>                                                                                            |             | 6. Annual Report must be signed.*<br>Signature: Heidi Gropp<br>Name (type or print): Heidi Gropp<br>Date: 05/03/2017<br>Title: Office Manager |        |                                                     |         |             |  |
| Processed 05/03/2017                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                     |        |                                                     |         |             |  |