| No. W 128809 | | Due no later than Sep 30, 2018 Annual Report Form | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) SHARON JENNECE KAHUHU | | | |
|--|-------------------|---|---------------------------------------|----------------|--|---------|-------------|--|
| Return to: | | | | | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. DIRECTED LIGHT, LLC SHARON JENNECE KAHUHU 10639 PIPEVINE DRIVE NAMPA ID 83687 | | NAMPA ID | 10639 PIPEVINE DRIVE NAMPA ID 83687 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| Limited Liability Con | npanies: Enter Na | mes and Addresses of | at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | SLOANE AH | -CHICK KAHUHU | 10639 PIPEVINE DRIVE | NAMPA | ID | USA | 83687 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 128809 | | Signature: Sharon Kahuhu | | | Date: 08/02/2018 | | | |
| | | Name (type or prir | | Title: Manager | | | | |
| Processed 08/02/2018 | | * Electronically provid | ed signatures are accepted as origina | l signatures. | | | | |