

|  |              |   |       |  |         |                  |  |
|--|--------------|---|-------|--|---------|------------------|--|
| No. <b>W 174900</b>  |              | <b>Due no later than Nov 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>CASCADIA NW3 REAL ESTATE HOLDINGS, LLC<br>CASCADIA NW3 REAL ESTATE HOLDINGS<br>408 S EAGLE RD STE 205<br>EAGLE ID 83616<br>USA |       | REGISTERED AGENT SOLUTIONS INC<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |         |                  |  |
|  |              |   |       | 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   | OWEN HAMMOND | 408 S EAGLE RD SUITE 205  | EAGLE | ID   | USA     | 83616            |  |
| 5. Organized Under the Laws of:  |              | 6. Annual Report must be signed.*   |       |  |         |                  |  |
| <b>DE<br/>W 174900</b>   |              | Signature: Owen Hammond   |       |  |         | Date: 09/18/2017 |  |
|  |              | Name (type or print): Owen Hammond  |       |  |         | Title: President |  |
| Processed 09/18/2017   |              | * Electronically provided signatures are accepted as original signatures.   |       |  |         |                  |  |