

No. <b>W 89390</b>	<b>Due no later than Dec 31, 2017 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b>  ORKIN, LLC SHANNON COLE 2170 PIEDMONT RD NE ATLANTA GA 30324		PRENTICE-HALL CORPORATION SYST 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA  3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>ROLLINS INC</td> <td>2170 PIEDMONT ROAD NE</td> <td>ATLANTA</td> <td>GA</td> <td>USA</td> <td>30324</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	ROLLINS INC	2170 PIEDMONT ROAD NE	ATLANTA	GA	USA	30324	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <b>DELAWARE W 89390</b>		6. Signature:  Date: 12/15/2017 Name (type or print): <b>P. EDWARD NORTHEN</b> Title: <b>TREASURER</b>																																				

Issued 12/15/2017 by online

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**