

|                                                                                                                                                        |                  |                                                                                                                          |        |                                                              |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>W 141023</b>                                                                                                                                    |                  | <b>Due no later than Aug 31, 2015</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>STILWTR LLC<br>2105 CORONADO ST<br>IDAHO FALLS ID 83404 |        | GREGORY C CALDER<br>2105 CORONADO ST<br>IDAHO FALLS ID 83404 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                          |        | 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                                                                                                                                                 | JOSEPHINE POWELL | 35 WINTERGREEN CT                                                                                                        | DRIGGS | ID                                                           | USA     | 83422       |  |
| MEMBER                                                                                                                                                 | ALANN POWELL     | 35 WINTERGREEN CT.                                                                                                       | DRIGGS | ID                                                           | USA     | 83422       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 141023</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Gregory C. Calder<br>Name (type or print): Gregory C. Calder             |        |                                                              |         |             |  |
| Date: 09/08/2015<br>Title: Registered Agent                                                                                                            |                  |                                                                                                                          |        |                                                              |         |             |  |
| Processed 09/08/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                |        |                                                              |         |             |  |