| No. W 27625 | | Due no later than Dec 31, 2016 | | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------------------|--|----------------------|------------------|--|---------|-------------|--|
| Return to: | | Annual Report Form | | | PETER MINFORD 135 SIMPSON DRIVE KETCHUM ID 83340 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. DATA INFORMATICS, LLC PETER W MINFORD PO BOX 9323 NAPLES FL 34101-9323 | | KETCHUM ID | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | | |
| Office Held | Name | 9 | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | MANAGER PETER MINFORD | | 135 SIMPSON DRIVE | KETCHUM | ID | | 83340 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Peter W Minford | | Date: | Date: 10/28/2016 | | | |
| W 27625 | | Name (type or print): Peter W Minford | | Title: | Title: Managing Member | | | |
| Processed 10/28/2016 | 5 | * Electronically provided signatures are accepted as original signatures. | | | | | | |