

|                                                                                                                                                        |                |                                                                                                                                                                    |       |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|-------------|--|
| No. <b>C 156959</b>                                                                                                                                    |                | <b>Due no later than Oct 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>COMBS MANAGEMENT & FINANCE, INC.<br>KYLA WESTERBERG<br>536 CALDWELL BLVD<br>NAMPA ID 83651<br>USA |       | DENNIS M COMBS<br>536 CALDWELL BLVD<br>NAMPA ID 83651 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                    |       | 3. <u>New</u> Registered Agent Signature:*            |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                |                                                                                                                                                                    |       |                                                       |         |             |  |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                               | City  | State                                                 | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | DENNIS M COMBS | 536 CALDWELL BLVD                                                                                                                                                  | NAMPA | ID                                                    | USA     | 83651       |  |
| SECRETARY                                                                                                                                              | SHEILA R COMBS | 536 CALDWELL BLVD                                                                                                                                                  | NAMPA | ID                                                    | USA     | 83651       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 156959</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Kyla Westerberg<br>Name (type or print): Kyla Westerberg<br>Date: 10/13/2015<br>Title: General Manager             |       |                                                       |         |             |  |
| Processed 10/13/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                          |       |                                                       |         |             |  |