No. W 157198		Due no later than Oct 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LOADPAY LLC 222 N PLYMOUTH AVE NEW PLYMOUTH ID 83655		SCOTT MOSCRIP 222 N PLYMOUTH AVE NEW PLYMOUTH ID 83655 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
4. Limited Liability Compai	nies: Enter Nai	mes and Addresses of at	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	SCOTT W I	MOSCRIP	222 N PLYMOUTH AVE	NEW PLYMOUTH	ID	USA	83655
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Cody Ellis		Date: 08/24/2018			
W 157198		Name (type or print): Cody Ellis		Title: Controller			
Processed 08/24/2018 * Electronically provided signatures are accepted as original signatures.							