| No. W 134434 | | Due no later than Feb 28, 2018 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------------------|--|---|-----------------|--|---------|-------------|--|
| Return to: | | Annual Report Form | | C40 F 110 /46 | KRISTINA ANDERSON | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. BOISE OAK BARREL, LLC KRISTINA ANDERSON 648 E HAVASU FALLS ST MERIDIAN ID 83646 | | MERIDIAN II | 648 E HAVASU FALLS ST MERIDIAN ID 83646 3. New Registered Agent Signature:* | | | |
| NO FILIN RECEIVED BY | DUE DATE | man and Address | of at least one Manhou or Managar | | | | | |
| 4. Limited Liability Co Office Held | ompanies: Enter Na Name | mes and Addresse | es of at least one Member or Manager. Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | MARK ANDE | RSON | 648 E HAVASU FALLS ST | MERIDIAN | ID | USA | 83646 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 134434 | | Signature: Kristina Anderson | | Date | Date: 02/27/2018 | | | |
| | | Name (type or print): Kristina Anderson | | Title | Title: Managing Member | | | |
| Processed 02/27/201 | 18 | * Electronically p | rovided signatures are accepted as origina | al signatures. | | | | |