

|  |                |  |          |  |         |             |  |
|--|----------------|--|----------|--|---------|-------------|--|
| No. <b>C 86994</b>   |                | <b>Due no later than Jun 30, 2014</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>CHUCK BUCKLE PLUMBING INCORPORATED<br>CHUCK BUCKLE CHUCK BUCKLE<br>BOX 496<br>BELLVUE ID 83313<br>USA |          | CHUCK BUCKLE<br>405 5TH ST. N. BELLVUE<br>BELLVUE ID 83313 |         |             |  |
|  |                |  |          | 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  | CHUCK C BUCKLE | P.O. BOX 496 405 5TH ST N.   | BELLEVUE | ID   | USA     | 83313-0496  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 86994</b>   |                | 6. Annual Report must be signed.*<br>Signature: Chuck Buckle<br>Name (type or print): Chuck Buckle   |          |  |         |             |  |
|  |                | Date: 04/12/2014<br>Title: owner / President   |          |  |         |             |  |
| Processed 04/12/2014   |                | * Electronically provided signatures are accepted as original signatures.  |          |  |         |             |  |