| No. <b>W 150521</b>  |           | Du  | 2. Registered A                      | 2. Registered Agent and Address (NO PO BOX) |   |         |             |  |
|--|-----------|---|--------------------------------------|---|---|---------|-------------|--|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |           | Annual Report Form  1. Mailing Address: Correct in this box if needed.  ICE SPRINGS LLC  WENDY COX DVORAK  5489 N BEETHOVEN AVE  MERIDIAN ID 83646-4715 |                                      | 5498 N BEET<br>MERIDIAN II                  | WENDY COX DVORAK 5498 N BEETHOVEN AVE MERIDIAN ID 83646-4715  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar               |           | mes and Addresse  | os of at least one Member or Manager |   |   |         |             |  |
| Office Held  | Name      | mes and Addresse  | Street or PO Address                 | City  | State   | Country | Postal Code |  |
| MANAGER  | WENDY COX | ( DVORAK  | 5489 N BEETHOVEN AVE                 | MERIDIAN                                    | ID  | USA     | 83646-4715  |  |
| 5. Organized Under the Laws of:  |           | 6. Annual Report must be signed.*   |                                      |   |   |         |             |  |
| ID   |           | Signature: Wendy Cox Dvorak   |                                      |   | Date: 04/17/2017  |         |             |  |
| W 150521   |           | Name (type o  |                                      | Title: Manager                              |   |         |             |  |
| Processed 04/17/2017 * Electronically provided signatures are accepted as original signatures. |           |   |                                      |   |   |         |             |  |