

|  |  |  |   |                                    |         |             |
|--|--|--|---|------------------------------------|---------|-------------|
| No. <b>W 35833</b>   | <b>Due no later than Jan 31, 2016</b><br><b>Annual Report Form</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>                                  |  | ROBERT L VAN ALLEN<br>2811 W CROOKED STICK CT<br>EAGLE ID 83616 |                                    |         |             |
|  | BOISE HOME NETWORK, LLC<br>ROBERT L VAN ALLEN<br>2811 W CROOKED STICK CT<br>EAGLE ID 83616 |  | 3. <u>New</u> Registered Agent Signature:*                      |                                    |         |             |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |  |  |   |                                    |         |             |
| Office Held  | Name   | Street or PO Address   | City  | State                              | Country | Postal Code |
| MANAGER  | ROBERT L VAN ALLEN   | 2811 W. CROOKED STICK CT   | EAGLE   | ID                                 |         | 83616       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 35833</b>   |  | 6. Annual Report must be signed.*<br>Signature: Robert L Van Allen<br>Name (type or print): Robert L Van Allen |   | Date: 11/14/2015<br>Title: Manager |         |             |
| Processed 11/14/2015   |  | * Electronically provided signatures are accepted as original signatures.                                      |   |                                    |         |             |