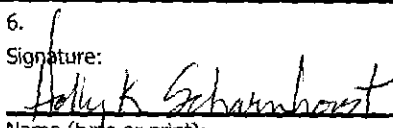
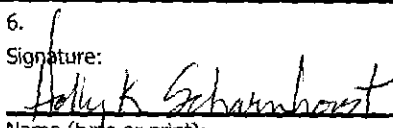
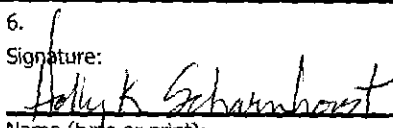


<b>No. W 13840</b>	<b>Due no later than Dec 31, 2017</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> BRUCE R SCHARNHORST 527 CHESTNUT ST GENESEE ID 83832
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> SCHARNHORST PETROLEUM, L.L.C. BRUCE R SCHARNHORST PO BOX 355 GENESEE ID 83832		<b>3. <u>New</u> Registered Agent Signature.</b>

**4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Bruce R Scharnhorst	PO Box 355	Genesee Id	Latah		83832
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Holly K Scharnhorst	PO Box 355	Genesee Id	Latah		83832
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold;">IDAHO W 13840</div>	<b>6.</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> <b>Signature:</b>    <hr/> <b>Name (type or print):</b>            Holly K Scharnhorst         </td> <td style="width: 40%;"> <b>Date:</b>            11-27-17   <b>Title:</b> co-owner / partner            11-27-17         </td> </tr> </table>	<b>Signature:</b>  <hr/> <b>Name (type or print):</b> Holly K Scharnhorst	<b>Date:</b> 11-27-17  <b>Title:</b> co-owner / partner 11-27-17
<b>Signature:</b>  <hr/> <b>Name (type or print):</b> Holly K Scharnhorst	<b>Date:</b> 11-27-17  <b>Title:</b> co-owner / partner 11-27-17		

Issued 11/07/2017 by CLH
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