

|                                                                                                                                                        |              |                                                                                                                                   |        |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 104392</b>                                                                                                                                    |              | <b>Due no later than Jun 30, 2017</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><br>EAGLE OIL, LLC<br>TODD PHILLIPS<br>PO BOX 608<br>BURLEY ID 83318 |        | DENNIS SMITH<br>1900 SOUTH 440 WEST<br>OAKLEY ID 83346 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                   |        | 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 |  |
| MEMBER                                                                                                                                                 | DENNIS SMITH | 1900 SOUTH 440 WEST                                                                                                               | OAKLEY | ID                                                     | USA     | 83346       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 104392</b>                                                                                          |              | 6. Annual Report must be signed.*<br>Signature: DENNIS SMITH<br>Name (type or print): DENNIS SMITH                                |        |                                                        |         |             |  |
|                                                                                                                                                        |              | Date: 07/25/2017<br>Title: MEMBER                                                                                                 |        |                                                        |         |             |  |
| Processed 07/25/2017                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                         |        |                                                        |         |             |  |