

No. C 180508		Due no later than Oct 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. LINKED INCORPORATED ZACHARY N CLEAVER 2647 ADAMS ROAD NYSSA OR 97913 USA		BRADLEY B POOLE 1110 N FIVE MILE RD BOISE ID 83713			
						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	ZACHARY N CLEAVER	2647 ADAMS ROAD	NYSSA	OR	USA	97913	
SECRETARY	KARLI J CLEAVER	2647 ADAMS ROAD	NYSSA	OR	USA	97913	
5. Organized Under the Laws of: ID C 180508		6. Annual Report must be signed.* Signature: Zachary Cleaver Name (type or print): Zachary Cleaver Date: 08/15/2011 Title: President/CEO					
Processed 08/15/2011		* Electronically provided signatures are accepted as original signatures.					