| No. <b>W 35823</b>   |                | Due no later than Jan 31, 2015 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            |                | 1. Mailing Address: Correct in this box if needed.  FULTON ASSOCIATES, LLC  JANIS E FULTON PO BOX 10199  KETCHUM ID 83340  USA |                                      | 109 SAGEWI<br>SUN VALLEY | JANIS ELAINE FULTON 109 SAGEWILLOW RD SUN VALLEY 83353  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                | USA  |                                      |                          |   |         |             |  |
| 4. Limited Liability Compani   | ies: Enter Nar | nes and Addresse   | s of at least one Member or Manager. |                          |   |         |             |  |
| Office Held  | Name           |  | Street or PO Address                 | City                     | State   | Country | Postal Code |  |
| MEMBER   | JANIS ELAIN    | E FULTON   | 109 SAGEWILLOW RD                    | SUN VALLEY               | ID  |         | 83353       |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |                                      |                          |   |         |             |  |
| ID   |                | Signature: Janis Fulton  |                                      |                          | Date: 11/24/2014  |         |             |  |
| W 35823  |                | Name (type or print): Janis Fulton   |                                      |                          | Title: Member   |         |             |  |
| Processed 11/24/2014 * Electronically provided signatures are accepted as original signatures. |                |  |                                      |                          |   |         |             |  |