

|  |                  |   |         |  |         |                   |  |
|--|------------------|---|---------|--|---------|-------------------|--|
| No. <b>W 68835</b>   |                  | <b>Due no later than Nov 30, 2012</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>SAWTOOTH LIVESTOCK, LLC<br>DAVID MCDONALD<br>PO BOX 9330<br>KETCHUM ID 83340-7145<br>USA |         | DAVID S MCDONALD<br>121 N 9TH ST STE 402<br>BOISE ID 83702 |         |                   |  |
|  |                  |   |         | 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  | DAVID S MCDONALD | PO BOX 5  | KETCHUM | ID   | USA     | 83340             |  |
| 5. Organized Under the Laws of:  |                  | 6. Annual Report must be signed.*   |         |  |         |                   |  |
| <b>ID<br/>W 68835</b>  |                  | Signature: Jennifer Iacoboni  |         |  |         | Date: 09/26/2012  |  |
|  |                  | Name (type or print): Jennifer Iacoboni   |         |  |         | Title: Bookkeeper |  |
| Processed 09/26/2012   |                  | * Electronically provided signatures are accepted as original signatures.   |         |  |         |                   |  |