

|                                                                                                                                                        |                   |                                                                                                                                  |        |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 61765</b>                                                                                                                                     |                   | <b>Due no later than Apr 30, 2010</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>BEEGEE'S, LLC<br>315 S ALMON<br>MOSCOW ID 83843                 |        | DAVE GERMER<br>315 S ALMON<br>MOSCOW ID 83843      |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                  |        | 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                                                                                                                                                 | RICHARD BEEBE JR. | 315 S ALMON                                                                                                                      | MOSCOW | ID                                                 | USA     | 83843       |  |
| MEMBER                                                                                                                                                 | RICHARD C BEEBE   | 315 S ALMON                                                                                                                      | MOSCOW | ID                                                 | USA     | 83843       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 61765</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Cade Konen<br>Name (type or print): Cade Konen<br>Date: 02/15/2010<br>Title: Cpa |        |                                                    |         |             |  |
| Processed 02/15/2010                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                        |        |                                                    |         |             |  |