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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 119076</b>                                                                                                                                    |                   | <b>Due no later than Nov 30, 2015</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>WHITTAKER TWO DOT LAND, LLC<br>PAULA J WHITTAKER<br>PO BOX 240<br>LEADORE ID 83464 |         | FLOYD JAMES WHITTAKER<br>83 BIG EIGHT MILE RD<br>LEADORE ID 83464 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                     |         | 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                                                                                                                                                 | PAULA J WHITTAKER | 83 BIG 8 MILE ROAD PO BOX 240                                                                                                                       | LEADORE | ID                                                                | USA     | 83464            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                                   |         |                                                                   |         |                  |  |
| <b>ID<br/>W 119076</b>                                                                                                                                 |                   | Signature: Paula J Whittaker                                                                                                                        |         |                                                                   |         | Date: 10/25/2015 |  |
|                                                                                                                                                        |                   | Name (type or print): Paula J Whittaker                                                                                                             |         |                                                                   |         | Title: Member    |  |
| Processed 10/25/2015                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                           |         |                                                                   |         |                  |  |