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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------|---------------------|
| No. <b>W 120965</b>                                                                                                                                    |                       | Due no later than Jan 31, 2014                                                                                                                                                         |          | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ADVANCED SOFTWARE, LLC<br>MICHAEL D MCDANIEL<br>2863 E LUCCA DR<br>MERIDIAN ID 83642 |          | MICHAEL MACDANIEL II<br>2863 E LUCCA DR<br>MERIDIAN ID 83642 |                     |
|                                                                                                                                                        |                       |                                                                                                                                                                                        |          | 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                                                                                                                                                | MICHAEL DEAN MCDANIEL | 2863 E LUCCA DR                                                                                                                                                                        | MERIDIAN | ID                                                           | USA 83642           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 120965</b>                                                                                          |                       | 6. Annual Report must be signed.*<br>Signature: Michael McDaniel<br>Name (type or print): Michael McDaniel<br>Date: 12/01/2013<br>Title: President/Manager                             |          |                                                              |                     |
| Processed 12/01/2013                                                                                                                                   |                       | * Electronically provided signatures are accepted as original signatures.                                                                                                              |          |                                                              |                     |