

|                                                                                                                                                        |              |                                                                                                                                                         |            |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------------------|---------|-------------|--|
| No. <b>C 156383</b>                                                                                                                                    |              | <b>Due no later than Sep 30, 2009</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>KNOLL REAL ESTATE COMPANY<br>BRIAN KNOLL<br>4571 E INVERNESS DR<br>POST FALLS ID 83854 |            | BRIAN KNOLL<br>4571 E INVERNESS<br>POST FALLS ID 83854 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                                         |            | 3. <u>New</u> Registered Agent Signature:*             |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |              |                                                                                                                                                         |            |                                                        |         |             |  |
| Office Held                                                                                                                                            | Name         | Street or PO Address                                                                                                                                    | City       | State                                                  | Country | Postal Code |  |
| SECRETARY                                                                                                                                              | ANNE M KNOLL | 4571 E INVERNESS                                                                                                                                        | POST FALLS | ID                                                     | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 156383</b>                                                                                          |              | 6. Annual Report must be signed.*<br>Signature: Brian Knoll<br>Name (type or print): Brian Knoll                                                        |            |                                                        |         |             |  |
| Date: 10/25/2009<br>Title: President                                                                                                                   |              |                                                                                                                                                         |            |                                                        |         |             |  |
| Processed 10/25/2009                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                               |            |                                                        |         |             |  |