

|  |                  |  |        |  |         |             |  |
|--|------------------|--|--------|--|---------|-------------|--|
| No. <b>W 55660</b>   |                  | <b>Due no later than Oct 31, 2011</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>PALOUSE ENTERPRISES LLC<br>PO BOX 3493<br>MOSCOW ID 83843 |        | TRAVIS J WAMBEKE<br>1745 LORIENT LANE<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   | TRAVIS J WAMBEKE | 1745 LORIENT LANE  | MOSCOW | ID   | USA     | 83843       |  |
| MEMBER   | CONNIE L WAMBEKE | 1745 LORIENT LANE  | MOSCOW | ID   | USA     | 83843       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 55660</b>   |                  | 6. Annual Report must be signed.*<br>Signature: Travis J Wambeke<br>Name (type or print): Travis J Wambeke             |        |  |         |             |  |
|  |                  | Date: 08/26/2011<br>Title: Member  |        |  |         |             |  |
| Processed 08/26/2011   |                  | * Electronically provided signatures are accepted as original signatures.  |        |  |         |             |  |