

|                                                                                                                                                        |               |                                                                                                                                            |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 95333</b>                                                                                                                                     |               | <b>Due no later than Aug 31, 2014</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>DRY CREEK HOMES, LLC<br>DAVID NIELSEN<br>954 E OPUS ST<br>BOISE ID 83716  |       | DAVID NIELSEN<br>954 E OPUS ST<br>BOISE ID 83716   |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                            |       | 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                                                                                                                                                | DAVID NIELSEN | 954 E OPUS ST                                                                                                                              | BOISE | ID                                                 | USA     | 83716       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 95333</b>                                                                                           |               | 6. Annual Report must be signed.*<br>Signature: David Nielsen<br>Name (type or print): David Nielsen<br>Date: 06/15/2014<br>Title: Manager |       |                                                    |         |             |  |
| Processed 06/15/2014                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                  |       |                                                    |         |             |  |