

No. W 26860	Due no later than Nov 30, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DENNIS MITCHELL 16287 LAKE SHORE CALDWELL ID 83607	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MITCHELL PROPERTIES, LLC DENNIS MITCHELL 16287 LAKE SHORE CALDWELL ID 83607		3. <u>New</u> Registered Agent Signature.	

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager Member (circle one)						
Member	Dennis Mitchell	16287 Lake Shore Dr.	Caldwell	ID	Conyer	83607
Member	Devera Mitchell	16287 Lake Shore Dr.	Caldwell	ID	Conyer	83607

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 26860 </div>	6. <table style="width: 100%;"> <tr> <td style="width: 70%;"> Signature: <u><i>Devera Mitchell</i></u> </td> <td style="width: 30%;"> Date: <u>10-18-11</u> </td> </tr> <tr> <td> Name (type or print): <u>Devera Mitchell</u> </td> <td> Title: <u>member</u> </td> </tr> </table>	Signature: <u><i>Devera Mitchell</i></u>	Date: <u>10-18-11</u>	Name (type or print): <u>Devera Mitchell</u>	Title: <u>member</u>
Signature: <u><i>Devera Mitchell</i></u>	Date: <u>10-18-11</u>				
Name (type or print): <u>Devera Mitchell</u>	Title: <u>member</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.