

|                                                                                                                                                        |                |                                                                                                                                                |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 50200</b>                                                                                                                                     |                | <b>Due no later than May 31, 2012</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>STREAMSIDE INVESTMENTS, LLC<br>KEITH L STUCKI<br>524 E FUJII DR<br>NAMPA ID 83686 |       | KEITH L STUCKI<br>524 E FUJII DR<br>NAMPA ID 83686 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                |       | 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                                                                                                                                                | KEITH L STUCKI | 524 E FUJII DR                                                                                                                                 | NAMPA | ID                                                 | USA     | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 50200</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Keith L. Stucki<br>Name (type or print): Keith L. Stucki<br>Date: 03/08/2012<br>Title: Manager |       |                                                    |         |             |  |
| Processed 03/08/2012                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                      |       |                                                    |         |             |  |