

|  |                 |   |            |  |         |             |  |
|--|-----------------|---|------------|--|---------|-------------|--|
| No. <b>W 30443</b>   |                 | <b>Due no later than May 31, 2013</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>OVERLOOKED PROPERTIES LLC<br>BART K MCKINNON<br>23 MEADOW DR<br>FISH HAVEN ID 83287<br>USA |            | BART K MCKINNON<br>23 MEADOW DR<br>FISH HAVEN ID 83287 |         |             |  |
|  |                 |   |            | 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  | PAT G MCKINNON  | 1212 MEADOWVILLE RD   | LAKETOWN   | UT   | USA     | 84038       |  |
| MANAGER  | BART K MCKINNON | 23 MEADOW DR  | FISH HAVEN | ID   | USA     | 83287       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 30443</b>   |                 | 6. Annual Report must be signed.*<br>Signature: Bart McKinnon<br>Name (type or print): Bart McKinnon<br>Date: 05/28/2013<br>Title: Manager                  |            |  |         |             |  |
| Processed 05/28/2013   |                 | * Electronically provided signatures are accepted as original signatures.   |            |  |         |             |  |