

|                                                                                                                                                        |               |                                                                                                                                                         |          |                                                           |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------|---------|------------------|--|
| No. <b>W 107605</b>                                                                                                                                    |               | <b>Due no later than Oct 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>JVN PROPERTIES LLC<br>JON NISHIKAWA<br>5058 N SCHUBERT AVE<br>MERIDIAN ID 83646<br>USA |          | JON NISHIKAWA<br>5058 N SCHUBERT AVE<br>MERIDIAN ID 83646 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                                         |          | 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                                                                                                                                                | JON NISHIKAWA | 5058 N SCHUBERT AVE                                                                                                                                     | MERIDIAN | ID                                                        | USA     | 83646            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                                       |          |                                                           |         |                  |  |
| <b>ID<br/>W 107605</b>                                                                                                                                 |               | Signature: Jon Nishikawa                                                                                                                                |          |                                                           |         | Date: 09/30/2013 |  |
|                                                                                                                                                        |               | Name (type or print): Jon Nishikawa                                                                                                                     |          |                                                           |         | Title: Manager   |  |
| Processed 09/30/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                               |          |                                                           |         |                  |  |