

|  |                    |  |       |   |         |                  |  |
|--|--------------------|--|-------|---|---------|------------------|--|
| No. <b>W 31126</b>   |                    | <b>Due no later than Jun 30, 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>WEBSTER FAMILY, LLC<br>PENELOPE R SMALLEY<br>11400 W COURT STREET<br>PASCO WA 99301-6518<br>USA |       | DEAN C SORENSEN<br>1423 TYRELL LANE<br>BOISE ID 83706 |         |                  |  |
|  |                    |  |       | 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  | PENELOPE R SMALLEY | 11400 W COURT STREET   | PASCO | WA  | USA     | 99301            |  |
| 5. Organized Under the Laws of:  |                    | 6. Annual Report must be signed.*  |       |   |         |                  |  |
| <b>ID<br/>W 31126</b>  |                    | Signature: Penelope R Smalley  |       |   |         | Date: 04/14/2014 |  |
|  |                    | Name (type or print): Penelope R Smalley   |       |   |         | Title: Manager   |  |
| Processed 04/14/2014   |                    | * Electronically provided signatures are accepted as original signatures.  |       |   |         |                  |  |