

|                                                                                                                                                        |               |                                                                                            |             |                                                           |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------|------------------|-------------|--|
| No. <b>W 26474</b>                                                                                                                                     |               | <b>Due no later than Oct 31, 2010</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>Annual Report Form</b>                                                                  |             | WALLY STEWART<br>1608 MIDWAY<br>IDAHO FALLS ID 83406-6799 |                  |             |  |
|                                                                                                                                                        |               | <b>1. Mailing Address: Correct in this box if needed.</b>                                  |             | 3. <u>New</u> Registered Agent Signature:*                |                  |             |  |
|                                                                                                                                                        |               | WALLY'S AUTO CARE CENTER, LLC<br>WALLY STEWART<br>1608 MIDWAY<br>IDAHO FALLS ID 83406-6799 |             |                                                           |                  |             |  |
| 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                                                                                                                                                | WALLY STEWART | 1608 MIDWAY                                                                                | IDAHO FALLS | ID                                                        | USA              | 83406       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                          |             |                                                           |                  |             |  |
| <b>ID<br/>W 26474</b>                                                                                                                                  |               | Signature: nancy Stewart                                                                   |             |                                                           | Date: 10/06/2010 |             |  |
|                                                                                                                                                        |               | Name (type or print): nancy Stewart                                                        |             |                                                           | Title: Secretary |             |  |
| Processed 10/06/2010                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                  |             |                                                           |                  |             |  |