

|  |               |  |           |  |         |             |  |
|--|---------------|--|-----------|--|---------|-------------|--|
| No. <b>W 109857</b>  |               | <b>Due no later than Jan 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>RAPID RIVER RESTORATION LLC<br>TRAVIS ZOHNER<br>501 MARTHA<br>CHUBBUCK ID 83202 |           | ADAM BRISCOE<br>501 MARTHA<br>CHUBBUCK ID 83202    |         |             |  |
|  |               |  |           | 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 |  |
| MEMBER   | ADAM BRISCOE  | 501MARTHA STREET   | CHUBBUCK  | ID   | USA     | 83202       |  |
| MEMBER   | TRAVIS ZOHNER | 738 EBONY  | POCATELLO | ID   | USA     | 83201       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 109857</b>  |               | 6. Annual Report must be signed.*<br>Signature: Adam Briscoe<br>Name (type or print): Adam Briscoe   |           |  |         |             |  |
|  |               | Date: 02/15/2013<br>Title: Owner   |           |  |         |             |  |
| Processed 02/15/2013   |               | * Electronically provided signatures are accepted as original signatures.  |           |  |         |             |  |