

No. W 3006 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Oct 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) R TODD LAMBERT 23 W 450 N BLACKFOOT ID 83221															
		1. Mailing Address: Correct in this box if needed. TWO RIVERS LLC R TODD LAMBERT PO BOX 609 BLACKFOOT ID 83221		3. New Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																			
<table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager Member (circle one)</td> <td colspan="5"> <i>R. Todd Lambert, 23 W 450 N, Blackfoot, Id</i> </td> <td> <i>83221</i> </td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager Member (circle one)	<i>R. Todd Lambert, 23 W 450 N, Blackfoot, Id</i>					<i>83221</i>
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code													
Manager Member (circle one)	<i>R. Todd Lambert, 23 W 450 N, Blackfoot, Id</i>					<i>83221</i>													
5. Organized Under the Laws of: IDAHO W 3006		6. Signature: <i>R. Todd Lambert</i> Date: <i>10-27-10</i> Name (type or print): <i>R. Todd Lambert</i> Title: <i>owner</i>																	
Issued 10/25/2011 by KAH																			

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office