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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------|------------------|--|
| No. <b>W 58803</b>                                                                                                                                     |               | <b>Due no later than Feb 28, 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>MORNING DAWN, LLC<br>JAMES W KISER<br>PO BOX 190718<br>BOISE ID 83719 |       | JAMES W KISER<br>619 QUEENS GUARD WAY<br>BOISE ID 83709 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                        |       | 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                                                                                                                                                | JAMES W KISER | 619 QUEENS GUARD WAY                                                                                                                   | BOISE | ID                                                      | USA     | 83709            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                      |       |                                                         |         |                  |  |
| <b>ID<br/>W 58803</b>                                                                                                                                  |               | Signature: James W Kiser                                                                                                               |       |                                                         |         | Date: 01/13/2013 |  |
|                                                                                                                                                        |               | Name (type or print): James W Kiser                                                                                                    |       |                                                         |         | Title: Manager   |  |
| Processed 01/13/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                              |       |                                                         |         |                  |  |