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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|-------------------------|--|
| No. <b>W 11021</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>GARDNER-RIVER, LLC<br>JAMES P. SPECK<br>PO BOX 987<br>KETCHUM ID 83340 |        | JAMES P. SPECK<br>120 EAST AVE<br>KETCHUM ID 83340 |         |                         |  |
|                                                                                                                                                        |                   |                                                                                                                                         |        | 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                                                                                                                                                | KATHRYN A GARDNER | PO BOX 1200                                                                                                                             | HAILEY | ID                                                 | USA     | 83333                   |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 11021</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: James P. Speck<br>Name (type or print): James P. Speck                                  |        |                                                    |         |                         |  |
|                                                                                                                                                        |                   |                                                                                                                                         |        | Date: 12/21/2012                                   |         | Title: Registered Agent |  |
| Processed 12/21/2012                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                               |        |                                                    |         |                         |  |