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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 5936</b>                                                                                                                                      |                  | Due no later than Apr 30, 2009                                                                                                                      |       | 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>BDBG&G OF SALMON, LC<br>DAVID M WILLIAMS<br>2280 S MAIN<br>SALT LAKE CITY UT 84115 |       | DEBBIE OLPIN<br>1185 BLAKE ST NORTH<br>TWIN FALLS ID 83301 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                     |       | 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                                                                                                                                                | DAVID M WILLIAMS | 10238 WEEPING WILLOW DR                                                                                                                             | SANDY | UT                                                         | USA     | 84070       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 5936</b>                                                                                            |                  | 6. Annual Report must be signed.*<br>Signature: David M Williams<br>Name (type or print): David M Williams<br>Date: 03/13/2009<br>Title: Member     |       |                                                            |         |             |  |
| Processed 03/13/2009                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                           |       |                                                            |         |             |  |