

| No. <b>W 111776</b>  | <b>Due no later than Mar 31, 2013</b><br><b>Annual Report Form</b>  |   | 2. Registered Agent and Office<br><b>(NOT A P.O. BOX)</b><br>STEVE MALLORY<br>8220 BULLBURNS RD<br>EMMETT ID 83617 |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|---|---|--|-------------------|---|---|---|-------|---------|-------------|---|---------------|-------------|--------|----|-----|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>         RECEIVED BY DUE<br/>         DATE</b>   | 1. <b>Mailing Address: Correct in this box if needed.</b><br>STEVE'S MOBILE BUTCHER, LLC<br>PO BOX 754<br>EMMETT ID 83617 |   | 3. <u>New</u> Registered Agent Signature.  |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Steve Mallory</td> <td>P.O Box 754</td> <td>Emmett</td> <td>Id</td> <td>Gen</td> <td>83617</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |   |   |  | Manager or Member | Name  | Street or PO Address  | City  | State | Country | Postal Code | Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Steve Mallory | P.O Box 754 | Emmett | Id | Gen | 83617 | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  |
| Manager or Member  | Name  | Street or PO Address  | City   | State             | Country   | Postal Code   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>  | Steve Mallory   | P.O Box 754   | Emmett   | Id                | Gen   | 83617   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |   |  |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |   |  |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |   |  |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5. Organized Under the Laws of:<br><br><div style="text-align: center; font-size: 1.2em;">             IDAHO<br/>             W 111776           </div>  |   | 6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:<br/> </td> <td style="width: 40%;">           Date:<br/> <div style="text-align: center; font-size: 1.2em;">4-18-12</div> </td> </tr> <tr> <td>           Name (type or print):<br/> <div style="text-align: center; font-size: 1.2em;">Steve Mallory</div> </td> <td>           Title:<br/> <div style="text-align: center; font-size: 1.2em;">Owner/operator</div> </td> </tr> </table> |  | Signature:<br>    | Date:<br><div style="text-align: center; font-size: 1.2em;">4-18-12</div> | Name (type or print):<br><div style="text-align: center; font-size: 1.2em;">Steve Mallory</div> | Title:<br><div style="text-align: center; font-size: 1.2em;">Owner/operator</div> |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Signature:<br>   | Date:<br><div style="text-align: center; font-size: 1.2em;">4-18-12</div>   |   |  |                   |   |   |   |       |         |             |   |               |             |        |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Issued 04/12/2013 by SLD

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM