

|                                                                                                                                                        |                                   |                                                                                                                                                                   |             |                                                                           |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 129422</b>                                                                                                                                    |                                   | <b>Due no later than Sep 30, 2014</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>NORTH WIND BAKER PARTNERSHIP JV, LLC<br>TRINA POLLMAN<br>1425 HIGHAM ST<br>IDAHO FALLS ID 83402      |             | C T CORPORATION SYSTEM<br>921 S ORCHARD ST STE G<br>BOISE ID 83705<br>USA |         |             |  |
|                                                                                                                                                        |                                   |                                                                                                                                                                   |             | 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 |  |
| MEMBER                                                                                                                                                 | NORTH WIND RESOURCE<br>CONSULTING | 1425 HIGHAM STREET                                                                                                                                                | IDAHO FALLS | ID                                                                        | USA     | 83402-1513  |  |
| 5. Organized Under the Laws of:<br><br><b>DE<br/>W 129422</b>                                                                                          |                                   | 6. Annual Report must be signed.*<br>Signature: Trina Pollman<br>Name (type or print): Trina Pollman<br>Date: 07/15/2014<br>Title: Compliance/Licensing Admstratr |             |                                                                           |         |             |  |
| Processed 07/15/2014                                                                                                                                   |                                   | * Electronically provided signatures are accepted as original signatures.                                                                                         |             |                                                                           |         |             |  |