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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------|---------|------------------|--|
| No. <b>W 44196</b>                                                                                                                                     |             | <b>Due no later than Nov 30, 2011</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ROWENA, LLC<br>ZANE LEVITT<br>PO BOX 343<br>SUN VALLEY ID 83353 |            | ZANE LEVITT<br>180 7TH ST EAST UNIT B1<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      |  |
| MEMBER                                                                                                                                                 | ZANE LEVITT | PO BOX 343                                                                                                                                                        | SUN VALLEY | ID                                                         | USA     | 83353            |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 44196</b>                                                                                           |             | 6. Annual Report must be signed.*<br>Signature: Zlevitt<br>Name (type or print): Zlevitt                                                                          |            |                                                            |         |                  |  |
|                                                                                                                                                        |             |                                                                                                                                                                   |            | Date: 11/28/2011                                           |         | Title: President |  |
| Processed 11/28/2011                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                         |            |                                                            |         |                  |  |