

No. W 50366		Due no later than May 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KAROL WARD & CO. LLC KAROL WARD PO BOX 1522 HAILEY ID 83333		KAROL WARD 1410 BLUE LAKE DR HAILEY ID 83333			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KAROL WARD	Street or PO Address PO BOX 1522		City HAILEY	State ID	Country USA	Postal Code 83333
5. Organized Under the Laws of: ID W 50366		6. Annual Report must be signed.* Signature: Karol A Ward Name (type or print): Karol A Ward Date: 03/21/2014 Title: Owner					
Processed 03/21/2014 * Electronically provided signatures are accepted as original signatures.							