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| No. W 95290 | | Due no later than Aug 31, 2013 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. COVA, LLC THOMAS M VASSEUR 409 COEUR D ALENE AVE COEUR D ALENE ID 83814 USA | | THOMAS VASSEUR 409 COEUR D ALENE AVE COEUR D ALENE ID 83814 | | | |
| 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 | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | JOHN COGHLAN | 3773 W. 5TH AVENUE 3RD FLOOR | POST FALLS | ID | USA | 83854 | |
| MEMBER | THOMAS M VASSEUR | 409 COEUR D'ALENE AVENUE | COEUR D'ALENE | ID | USA | 83816 | |
| 5. Organized Under the Laws of: ID W 95290 | | 6. Annual Report must be signed.* Signature: Thomas M. Vasseur Name (type or print): Thomas M. Vasseur | | | | | |
| | | Date: 07/31/2013 Title: Member/Reg. Agent | | | | | |
| Processed 07/31/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |