

| No. W 28277 | Due no later than January 31, 2009 Annual Report Form | | 2. Registered Agent and Office NO PO BOX | | | | | | | | | | | | |
|--|--|------------------------|--|-------------|-------|------------------------|------|-------|-----|-----------|-----------------|------------|-----------|----|-------|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address - Correct in this box, if applicable | | KEVIN SHOEMAKER 241 SW 3RD ST FRUITLAND, ID 83619 3. <u>New</u> Registered Agent Signature | | | | | | | | | | | | |
| | GEM STATE PROPERTY MANAGEMENT SERVI PO BOX 205 FRUITLAND, ID 83619 | | | | | | | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Office held</th> <th style="width:20%;">Name</th> <th style="width:35%;">Street or P.O. Address</th> <th style="width:15%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Kevin Shoemaker</td> <td>PO Box 205</td> <td>Fruitland</td> <td>ID</td> <td>83619</td> </tr> </tbody> </table> | | | | Office held | Name | Street or P.O. Address | City | State | Zip | President | Kevin Shoemaker | PO Box 205 | Fruitland | ID | 83619 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | |
| President | Kevin Shoemaker | PO Box 205 | Fruitland | ID | 83619 | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 28277 | 6. Signature <u><i>Kevin Shoemaker</i></u> Date <u>12/30/08</u> Name (Typed or Printed) <u>KEVIN SHOEMAKER</u> Title <u>President</u> | | | | | | | | | | | | | | |
| Issued 11/05/2008 Do Not Tape or Staple | | 200901007265 | | | | | | | | | | | | | |