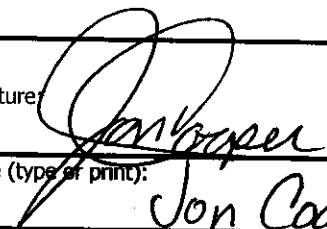


No. W 57970	Due no later than Jan 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JON P COOPER 10 BEAR TOWN HORSESHOE BEND ID 83629																												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. COOPER'S BEAR TOWN, LLC 10 BEAR TOWN HORSESHOE BEND ID 83629		3. <u>New</u> Registered Agent Signature.																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																															
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																					
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																									
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"> Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"> <i>Jon Cooper 10 Beartown Horseshoe Bend IDA. U.S.A 83629</i> </td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> </table>				Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Jon Cooper 10 Beartown Horseshoe Bend IDA. U.S.A 83629</i>						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: large;"> IDAHO W 57970 </div>		6. Signature:  <hr/> Name (type or print): <i>Jon Cooper</i> <hr/> <div style="float: right; text-align: right;"> Date: <u>NOV. 26 2013</u> Title: <u>owner</u> </div>																													
Issued 11/19/2013 by DK1																															

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