| No. <b>W 53187</b>  |                | Due no later than Aug 31, 2009 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  NO FILING FEE IF |                | 1. Mailing Address: Correct in this box if needed.  MAY CO. LLC  WALLACE L MAY  304 N MIRA  STAR ID 83669-5426  USA |                                 |   | WALLACE L MAY 304 N MIRA STAR ID 83668  3. New Registered Agent Signature:* |       |         |             |
| NO FILING HEE IF RECEIVED BY DUE DATE   |                | USA   |                                 |   |   |       |         |             |
| 4. Limited Liability Compar   | nies: Enter Na | mes and Addresses of  | at least one Member or Manager. |   |   |       |         |             |
| Office Held   | Name           |   | Street or PO Address            |   | City  | State | Country | Postal Code |
| MEMBER  | WALLACE L      | MAY   | 304 N MIRA                      |   | STAR  | ID    | USA     | 83669-5426  |
| 5. Organized Under the Laws of:   |                | 6. Annual Report must be signed.*   |                                 |   |   |       |         |             |
| ID<br>W 53187   |                | Signature: Wallace L. May   |                                 |   | Date: 06/09/2009  |       |         |             |
|   |                | Name (type or print): Wallace L. May  |                                 |   | Title: Owner  |       |         |             |
| Processed 06/09/2009 * Electronically provided signatures are accepted as original signatures.        |                |   |                                 |   |   |       |         |             |