

|                                                                                                                                                        |                    |                                                                                                              |         |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 58196</b>                                                                                                                                     |                    | <b>Due no later than Jan 31, 2013</b>                                                                        |         | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>Annual Report Form</b>                                                                                    |         | ROBYN FYFFE<br>303 W BANNOCK ST<br>BOISE ID 83702  |         |                  |  |
|                                                                                                                                                        |                    | <b>1. Mailing Address: Correct in this box if needed.</b>                                                    |         | 3. <u>New</u> Registered Agent Signature:*         |         |                  |  |
|                                                                                                                                                        |                    | ALPHA OMEGA PROPERTIES AND INVESTMENTS LLC<br>MATTHEW C CAMPBELL<br>143 E 10TH ST<br>DURANGO CO 81301<br>USA |         |                                                    |         |                  |  |
| 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      |  |
| MANAGER                                                                                                                                                | MATTHEW C CAMPBELL | 143 E 10TH ST.                                                                                               | DURANGO | CO                                                 | USA     | 81301            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                    | 6. Annual Report must be signed.*                                                                            |         |                                                    |         |                  |  |
| <b>ID<br/>W 58196</b>                                                                                                                                  |                    | Signature: Matthew Campbell                                                                                  |         |                                                    |         | Date: 02/05/2013 |  |
|                                                                                                                                                        |                    | Name (type or print): Matthew Campbell                                                                       |         |                                                    |         | Title: Manager   |  |
| Processed 02/05/2013                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                    |         |                                                    |         |                  |  |