

|                                                                                                                                                        |              |                                                                                                                                               |       |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 43243</b>                                                                                                                                     |              | <b>Due no later than Sep 30, 2009</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>1. Mailing Address: Correct in this box if needed.</b><br><br>LEIF TRADING, LLC<br>SCOTT L ROSE<br>300 W MAIN ST STE 153<br>BOISE ID 83702 |       | SCOTT L ROSE<br>300 W MAIN ST STE 153<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                               |       | 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                                                                                                                                                 | SCOTT L ROSE | 300 W MAIN ST STE 153                                                                                                                         | BOISE | ID                                                      | USA     | 83702       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 43243</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Scott Rose<br>Name (type or print): Scott Rose<br>Date: 07/24/2009<br>Title: President        |       |                                                         |         |             |  |
| Processed 07/24/2009                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                     |       |                                                         |         |             |  |