

No. W 102715		Due no later than Apr 30, 2015 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		1. Mailing Address: Correct in this box if needed. IDAHO 12, L.L.C. MICHAEL L MERRIMAN 7595 E MCDONALD DR STE 130 SCOTTSDALE AZ 85250		WILLIAM A PARSONS 137 W 13TH ST BURELY ID 83318			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name PATRICIA L OLSON	Street or PO Address 7595 E MCDONALD DR STE 130		City SCOTTSDALE	State AZ	Country USA	Postal Code 85250
5. Organized Under the Laws of: AZ W 102715		6. Annual Report must be signed.* Signature: Patricia L. Olson Name (type or print): Patricia L. Olson Date: 05/26/2015 Title: Member					
Processed 05/26/2015 * Electronically provided signatures are accepted as original signatures.							