

|  |              |   |       |   |         |             |  |
|--|--------------|---|-------|---|---------|-------------|--|
| No. <b>W 67305</b>   |              | <b>Due no later than Oct 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>1. Mailing Address: Correct in this box if needed.</b><br>MOYIE MEADOWS, LLC<br>KELLY GREENE<br>77 W COMMERCE DR STE B<br>HAYDEN ID 83835<br>USA |       | KELLY GREENE<br>77 W COMMERCE DR STE B<br>HAYDEN ID 83835 |         |             |  |
|  |              |   |       | 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 |  |
| MANAGER  | KELLY GREENE | 29750 GOOD HOPE RD  | ATHOL | ID  | USA     | 83801       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 67305</b>   |              | 6. Annual Report must be signed.*<br>Signature: Kelly Greene<br>Name (type or print): Kelly Greene  |       |   |         |             |  |
| Date: 08/09/2013<br>Title: Manager   |              |   |       |   |         |             |  |
| Processed 08/09/2013   |              | * Electronically provided signatures are accepted as original signatures.   |       |   |         |             |  |