

|   |                   |   |         |  |         |             |  |
|---|-------------------|---|---------|--|---------|-------------|--|
| No. <b>W 32844</b>  |                   | <b>Due no later than Aug 31, 2008</b><br><b>Annual Report Form</b>  |         | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>VARMIT GETTER, LLC<br>BARRY N SCHROEDER<br>130 N MAIN ST<br>PAYETTE ID 83661 |         | BARRY SCHROEDER<br>130 N MAIN ST<br>PAYETTE ID 83661 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  |                   |   |         | 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  | BARRY N SCHROEDER | 130 N MAIN ST   | PAYETTE | ID   | USA     | 83661       |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 32844</b>                                  |                   | 6. Annual Report must be signed.*<br><br>Signature: Karen Pollock<br>Name (type or print): Karen Pollock                                      |         |  |         |             |  |
|   |                   | Date: 09/17/2008<br>Title: Office Manager   |         |  |         |             |  |
| Processed 09/17/2008      * Electronically provided signatures are accepted as original signatures. |                   |   |         |  |         |             |  |