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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------|---------|-------------|--|
| No. <b>W 128862</b>                                                                                                                                    |              | <b>Due no later than Sep 30, 2015</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>MOUNTAIN BLUEBIRD PROPERTIES, LLC<br>JULIE SITNEY<br>18 BROWN'S LANE<br>SAUGERTIES NY 12477 |            | CHRISTOPHER J MOORE<br>1219 IDAHO ST<br>LEWISTON ID 83501 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                                          |            | 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                                                                                                                                                 | JULIE SITNEY | 18 BROWNS LN                                                                                                                                             | SAUGERTIES | NY                                                        | USA     | 12477-3908  |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 128862</b>                                                                                              |              | 6. Annual Report must be signed.*<br>Signature: Julie Sitney<br>Name (type or print): Julie Sitney                                                       |            |                                                           |         |             |  |
|                                                                                                                                                        |              | Date: 10/13/2015<br>Title: Principal                                                                                                                     |            |                                                           |         |             |  |
| Processed 10/13/2015                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                |            |                                                           |         |             |  |