

|                                                                                                                                                        |                 |                                                                                                                                          |      |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 84433</b>                                                                                                                                     |                 | <b>Due no later than Jun 30, 2014</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>F/V MIZPAH, LLC<br>MATTHEW E DOUMIT<br>1100 LAMB RD<br>TROY ID 83871<br>USA |      | MATTHEW E DOUMIT<br>1100 LAMB RD<br>TROY ID 83871  |         |                  |  |
|                                                                                                                                                        |                 |                                                                                                                                          |      | 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                                                                                                                                                 | STACEY A DOUMIT | 1100 LAMB ROAD                                                                                                                           | TROY | ID                                                 | USA     | 83871            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                        |      |                                                    |         |                  |  |
| <b>ID<br/>W 84433</b>                                                                                                                                  |                 | Signature: Matthew E. Doumit                                                                                                             |      |                                                    |         | Date: 07/13/2014 |  |
|                                                                                                                                                        |                 | Name (type or print): Matthew E. Doumit                                                                                                  |      |                                                    |         | Title: Owner     |  |
| Processed 07/13/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                |      |                                                    |         |                  |  |