| No. W 69134 | | Due no later than Dec 31, 2011 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-------------------|---|------------------|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | MARK JOHNSON 802 CLEARWATER LOOP POST FALLS ID 83854 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. OMG NORTH AMERICA, L.L.C. MARK F JOHNSON 802 CLEARWATER LOOP POST FALLS ID 83854 | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Comp | oanies: Enter Nar | nes and Addresses of at least one Member or Mar | nager. | | | | |
| Office Held | Name | Street or PO Address | | City | State | Country | Postal Code |
| Manager Mark John: | | SON 802 CLEARWATER LOOF | • | POST FALLS | ID | USA | 83854 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Mark Johnson | Date: 10/20/2011 | | | | |
| W 69134 | | Name (type or print): Mark Johnson | Title: Manager | | | | |
| Processed 10/20/2011 * Electronically provided signatures are accepted as original signatures. | | | | | | | |