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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 45254</b>                                                                                                                                     |                        | <b>Due no later than Dec 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><br>RIVERBEND INDUSTRIAL PROPERTY, LLC<br>MARIA TERESA SCHNEIDER<br>690 S CLEARWATER LOOP<br>POST FALLS ID 83854 |            | MARIA TERESA SCHNEIDER<br>690 S CLEARWATER LOOP<br>POST FALLS ID 83854 |         |             |  |
|                                                                                                                                                        |                        |                                                                                                                                                                               |            | 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                                                                                                                                                | MARIA TERESA SCHNEIDER | 690 S CLEARWATER LOOP                                                                                                                                                         | POST FALLS | ID                                                                     | USA     | 83854       |  |
| MANAGER                                                                                                                                                | ANDREAS SCHNEIDER      | 690 S CLEARWATER LOOP                                                                                                                                                         | POST FALLS | ID                                                                     | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 45254</b>                                                                                           |                        | 6. Annual Report must be signed.*<br>Signature: Maria T Schneider<br>Name (type or print): Maria T Schneider                                                                  |            |                                                                        |         |             |  |
| Date: 10/21/2013<br>Title: Manager                                                                                                                     |                        |                                                                                                                                                                               |            |                                                                        |         |             |  |
| Processed 10/21/2013                                                                                                                                   |                        | * Electronically provided signatures are accepted as original signatures.                                                                                                     |            |                                                                        |         |             |  |