

|                                                                                                                                                        |                |                                                                           |         |                                                     |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------|---------|-----------------------------------------------------|------------------|-------------|--|
| No. <b>W 73131</b>                                                                                                                                     |                | <b>Due no later than Apr 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>Annual Report Form</b>                                                 |         | LARRY SCHWARTZ<br>1420 HEROIC RD<br>HAILEY ID 83333 |                  |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b>                 |         | 3. <u>New</u> Registered Agent Signature:*          |                  |             |  |
|                                                                                                                                                        |                | EMILYCHASE LLC<br>LARRY SCHWARTZ<br>PO BOX 3623<br>KETCHUM ID 83340       |         |                                                     |                  |             |  |
| 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                                                                                                                                                 | LARRY SCHWARTZ | PO BOX 3623                                                               | KETCHUM | ID                                                  | USA              | 83340       |  |
| MEMBER                                                                                                                                                 | JULIE SIEGEL   | PO BOX 5913                                                               | KETCHUM | ID                                                  | USA              | 83340       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                         |         |                                                     |                  |             |  |
| <b>ID<br/>W 73131</b>                                                                                                                                  |                | Signature: Larry Schwartz                                                 |         |                                                     | Date: 02/11/2014 |             |  |
|                                                                                                                                                        |                | Name (type or print): Larry Schwartz                                      |         |                                                     | Title: Member    |             |  |
| Processed 02/11/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures. |         |                                                     |                  |             |  |