

|  |                    |   |            |   |         |             |  |
|--|--------------------|---|------------|---|---------|-------------|--|
| No. <b>W 62017</b>   |                    | <b>Due no later than Apr 30, 2010</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>CBSLS, LLC<br>C BRET STODDARD<br>1025 COUNTRY RD<br>SUGAR CITY ID 83448<br>USA                 |            | C BRET STODDARD<br>1025 COUNTRY RD<br>SUGAR CITY ID 83448 |         |             |  |
|  |                    |   |            | 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   | C BRET STODDARD    | 391 N 1900 E  | ST ANTHONY | ID  | USA     | 83445       |  |
| MEMBER   | STEPHANIE STODDARD | 391 N 1900 E  | ST ANTHONY | ID  | USA     | 83445       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 62017</b>   |                    | 6. Annual Report must be signed.*<br>Signature: Clinton Bret Stoddard<br>Name (type or print): Clinton Bret Stoddard<br>Date: 02/11/2010<br>Title: Member/owner |            |   |         |             |  |
| Processed 02/11/2010   |                    | * Electronically provided signatures are accepted as original signatures.   |            |   |         |             |  |