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|--|----------------|--|-----------|--|---------|-------------|--|
| No. W 86270 | | Due no later than Aug 31, 2012 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TRIAPITA, LLC BRET I GIBSON 908 16TH AVE LEWISTON ID 83501 USA | | WILLIAM VERN MCCANN JR 1027 BRYDEN AVE LEWISTON ID 83501 | | | |
| | | | | 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 | SARAH B GIBSON | 2350 PITCHSTONE DR | CLARKSTON | WA | USA | 99403 | |
| 5. Organized Under the Laws of: ID W 86270 | | 6. Annual Report must be signed.* Signature: Sarah Gibson Name (type or print): Sarah Gibson Date: 07/15/2012 Title: Manager | | | | | |
| Processed 07/15/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |