

|  |            |   |          |  |         |                  |  |
|--|------------|---|----------|--|---------|------------------|--|
| No. <b>W 30317</b>   |            | <b>Due no later than Apr 30, 2012</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>FLY, LLC<br>KENT MILLS<br>799 W AMITY RD<br>MERIDIAN ID 83642<br>USA |          | KENT MILLS<br>799 W AMITY RD<br>MERIDIAN ID 83642  |         |                  |  |
|  |            |   |          | 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   | DOUG OLSON | 1285 W WILD SHEEP LANE  | MERIDIAN | ID   | USA     | 83642            |  |
| MEMBER   | KENT MILLS | 799 W AMITY RD  | MERIDIAN | ID   | USA     | 83642-83642      |  |
| 5. Organized Under the Laws of:  |            | 6. Annual Report must be signed.*   |          |  |         |                  |  |
| <b>ID<br/>W 30317</b>  |            | Signature: T Kent Mills   |          |  |         | Date: 05/10/2012 |  |
|  |            | Name (type or print): T Kent Mills  |          |  |         | Title: Manager   |  |
| Processed 05/10/2012   |            | * Electronically provided signatures are accepted as original signatures.   |          |  |         |                  |  |