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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------|---------------------|
| No. <b>W 83777</b>                                                                                                                                     |                 | <b>Due no later than May 31, 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>5 O'CLOCK SOMEWHERE, LLC<br>KARLEEN K MEYER<br>7896 W LANCASTER RD<br>RATHDRUM ID 83858 |          | GRUPP LAW FIRM PLLC<br>842 W KATHLEEN AVE<br>COEUR D'ALENE ID 83815 |                     |
|                                                                                                                                                        |                 |                                                                                                                                                                                           |          | 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                                                                                                                                                | KARLEEN K MEYER | 7896 W LANCASTER                                                                                                                                                                          | RATHDRUM | ID                                                                  | USA 83858           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 83777</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Karleen Meyer<br>Name (type or print): Karleen Meyer<br>Date: 03/09/2012<br>Title: Mngr                                                   |          |                                                                     |                     |
| Processed 03/09/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                                 |          |                                                                     |                     |