No. <b>W 5641</b>				2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  SOUTH FORK OUTFITTERS, LLC  BOB ECKHARDT  PO BOX 20  SWAN VALLEY ID 83449		BOB ECKHARDT  1147 SHADOW MOUNTAIN CT IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
4. Limited Liability Compa	nies: Enter Nar	mes and Addresses of a	t least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER MARK F ROCKEFELLER		CKEFELLER	ROOM 5600 30 ROCKEFELLER PLAZE	NEW YORK	NY	USA	10112
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Bob Eckhardt		Date: 12/13/2011			
W 5641		Name (type or print): Bob Eckhardt		Title: Agent			
rocessed 12/13/2011 * Electronically provided signatures are accepted as original signatures.							