

No. W 50650		Due no later than May 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. OLIPHANT FINANCIAL, LLC ROBERT A MORRIS 9009 TOWN CENTER PARKWAY LAKEWOOD RANCH FL 34202		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ROBERT A MORRIS	Street or PO Address 1800 SECOND ST STE 972		City SARASOTA	State FL	Country USA	Postal Code 34236
5. Organized Under the Laws of: FL W 50650		6. Annual Report must be signed.* Signature: Robert A Morris Name (type or print): Robert A Morris Date: 03/25/2014 Title: President					
Processed 03/25/2014 * Electronically provided signatures are accepted as original signatures.							