

|                                                                                                                                                        |                  |                                                                                                                                                     |      |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|------------------|--|
| No. <b>C 169639</b>                                                                                                                                    |                  | Due no later than Oct 31, 2013                                                                                                                      |      | 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>DREAMLAND LANDSCAPING, INC<br>THOREN F SPEAROW<br>9000 KUNA RD<br>KUNA ID 83634<br>USA |      | THOREN SPEAROW<br>9000 KUNA RD<br>KUNA ID 83634    |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                     |      | 3. <u>New</u> Registered Agent Signature:*         |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                  |                                                                                                                                                     |      |                                                    |         |                  |  |
| Office Held                                                                                                                                            | Name             | Street or PO Address                                                                                                                                | City | State                                              | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | THOREN F SPEAROW | 9000 KUNA RD                                                                                                                                        | KUNA | ID                                                 | USA     | 83634            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                   |      |                                                    |         |                  |  |
| <b>ID<br/>C 169639</b>                                                                                                                                 |                  | Signature: Thoren F Spearow                                                                                                                         |      |                                                    |         | Date: 09/25/2013 |  |
|                                                                                                                                                        |                  | Name (type or print): Thoren F Spearow                                                                                                              |      |                                                    |         | Title: Owner     |  |
| Processed 09/25/2013                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                           |      |                                                    |         |                  |  |