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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 22202</b>                                                                                                                                     |               | <b>Due no later than Jan 31, 2014</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>SNOWMASS ALPACAS LLC<br>JULIE SKINNER<br>270 RAPID LIGHTNING RD<br>SANDPOINT ID 83864<br>USA |           | JULIE OTIS SKINNER<br>270 RAPID LIGHTNING ROAD<br>SANDPOINT ID 83864 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                               |           | 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                                                                                                                                                | JULIE SKINNER | 270 RAPID LIGHTNING RD                                                                                                                                        | SANDPOINT | ID                                                                   | USA     | 83864       |  |
| MANAGER                                                                                                                                                | DON SKINNER   | 270 RAPID LIGHTNING RD                                                                                                                                        | SANDPOINT | ID                                                                   | USA     | 83864       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 22202</b>                                                                                           |               | 6. Annual Report must be signed.*<br>Signature: Lori Rist<br>Name (type or print): Lori Rist                                                                  |           |                                                                      |         |             |  |
|                                                                                                                                                        |               | Date: 11/18/2013<br>Title: Office Manager                                                                                                                     |           |                                                                      |         |             |  |
| Processed 11/18/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                     |           |                                                                      |         |             |  |