

|                                                                                                                                                        |                |                                                                                                                                                                           |             |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 44895</b>                                                                                                                                     |                | <b>Due no later than Nov 30, 2015</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>M.W. BEAN FAMILY INVESTMENTS, L.L.C.<br>MICHAEL W BEAN<br>3838 S YELLOWSTONE HWY<br>IDAHO FALLS ID 83402 |             | MIKE W BEAN<br>3838 S YELLOWSTONE HWY<br>IDAHO FALLS ID 83402 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                           |             | 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 |  |
| MEMBER                                                                                                                                                 | MICHAEL W BEAN | 3838 S YELLOWSTONE HWY                                                                                                                                                    | IDAHO FALLS | ID                                                            | USA     | 83402       |  |
| MEMBER                                                                                                                                                 | DEBORAH L BEAN | 3838 S YELLOWSTONE HWY.                                                                                                                                                   | IDAHO FALLS | ID                                                            | USA     | 83402       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 44895</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: MICHAEL BEAN<br>Name (type or print): MICHAEL BEAN<br>Date: 09/17/2015<br>Title: MEMBER                                   |             |                                                               |         |             |  |
| Processed 09/17/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                 |             |                                                               |         |             |  |