

|                                                                                                                                                        |               |                                                                                                                                            |          |                                                      |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------|---------|-------------|--|
| No. <b>C 101908</b>                                                                                                                                    |               | <b>Due no later than Apr 30, 2013</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>FMCI, INC.<br>MIKE MAUPIN<br>2769 S DENALI PL<br>MERIDIAN ID 83642<br>USA |          | MIKE MAUPIN<br>2769 S DENALI PL<br>MERIDIAN ID 83642 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                            |          | 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                                                                                                                                              | MIKE A MAUPIN | 2769 S. DENALI PLACE                                                                                                                       | MERIDIAN | ID                                                   | USA     | 83642-8103  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 101908</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Mike Maupin<br>Name (type or print): Mike Maupin                                           |          |                                                      |         |             |  |
| Date: 02/26/2013<br>Title: President                                                                                                                   |               |                                                                                                                                            |          |                                                      |         |             |  |
| Processed 02/26/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                  |          |                                                      |         |             |  |