

|  |                               |  |               |   |                |                      |  |
|--|-------------------------------|--|---------------|---|----------------|----------------------|--|
| No. <b>W 52616</b>   |                               | <b>Due no later than Jul 31, 2014</b><br><b>Annual Report Form</b>   |               | 2. Registered Agent and Address ( <b>NO PO BOX</b> )        |                |                      |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>JLMV, L.L.C.<br>TIMOTHY A HENRICKSON<br>3720 E LEWIS LANE<br>NAMPA ID 83686<br>USA            |               | TIMOTHY A HENRICKSON<br>3720 E LEWIS LANE<br>NAMPA ID 83686 |                |                      |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                               |  |               | 3. <u>New</u> Registered Agent Signature:*                  |                |                      |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                               |  |               |   |                |                      |  |
| Office Held<br>MEMBER  | Name<br>JAMES LEVI HENRICKSON | Street or PO Address<br>1610 SUNNY RIDGE ROAD ROOM 119   | City<br>NAMPA | State<br>ID   | Country<br>USA | Postal Code<br>83686 |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 52616</b>                                 |                               | 6. Annual Report must be signed.*<br><br>Signature: Timothy A Henrickson<br>Name (type or print): Timothy A Henrickson<br><br>Date: 05/29/2014<br>Title: Agent |               |   |                |                      |  |
| Processed 05/29/2014 * Electronically provided signatures are accepted as original signatures.     |                               |  |               |   |                |                      |  |