

|  |                   |   |             |   |         |                  |  |
|--|-------------------|---|-------------|---|---------|------------------|--|
| No. <b>W 71281</b>   |                   | <b>Due no later than Feb 28, 2010</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>WELL WIRED, L.L.C.<br>WILLIAM UHLENKOTT<br>306 GULCH RD<br>GRANGEVILLE ID 83530<br>USA |             | WILLIAM UHLENKOTT<br>306 GULCH RD<br>GRANGEVILLE ID 83530 |         |                  |  |
|  |                   |   |             | 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  | WILLIAM UHLENKOTT | 306 GULCH RD  | GRANGEVILLE | ID  | USA     | 83530            |  |
| 5. Organized Under the Laws of:  |                   | 6. Annual Report must be signed.*   |             |   |         |                  |  |
| <b>ID<br/>W 71281</b>  |                   | Signature: William Uhlenkott  |             |   |         | Date: 01/04/2010 |  |
|  |                   | Name (type or print): William Uhlenkott   |             |   |         | Title: Manager   |  |
| Processed 01/04/2010   |                   | * Electronically provided signatures are accepted as original signatures.   |             |   |         |                  |  |