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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------|---------|-------------------|--|
| No. <b>W 34693</b>                                                                                                                                     |                 | <b>Due no later than Nov 30, 2012</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>ACKER-CLEVELAND, LLC<br>MARIE COCHRAN<br>PO BOX 177<br>KETCHUM ID 83340-0177 |         | RANDALL L ACKER<br>106 S CLEAR CREEK<br>KETCHUM ID 83340-0177 |         |                   |  |
|                                                                                                                                                        |                 |                                                                                                                                           |         | 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                                                                                                                                                 | RANDALL L ACKER | PO BOX 177                                                                                                                                | KETCHUM | ID                                                            | USA     | 83340-0177        |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                         |         |                                                               |         |                   |  |
| <b>ID<br/>W 34693</b>                                                                                                                                  |                 | Signature: Marie Cochran                                                                                                                  |         |                                                               |         | Date: 09/27/2012  |  |
|                                                                                                                                                        |                 | Name (type or print): Marie Cochran                                                                                                       |         |                                                               |         | Title: Bookkeeper |  |
| Processed 09/27/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                 |         |                                                               |         |                   |  |