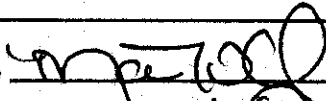


No. W 62851	Due no later than May 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable SNOW ZONE LLC 4178 FOREST GLEN AMMON, ID 83406		MATTHEW QUEEN 4178 FOREST GLEN AMMON, ID 83406												
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner/Manager</td> <td>MATTHEW QUEEN</td> <td>4178 Forest Glen</td> <td>Ammon</td> <td>ID</td> <td>83406</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Owner/Manager	MATTHEW QUEEN	4178 Forest Glen	Ammon	ID	83406
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Owner/Manager	MATTHEW QUEEN	4178 Forest Glen	Ammon	ID	83406										
5. Organized Under the Laws of: IDAHO W 62851	6. Signature  Date <u>19 Mar 08</u> Name (Typed or Printed) <u>MATTHEW QUEEN</u> Title <u>Owner/Manager</u>														