

|                                                                                                                                                        |                |                                                                                                                                                                                    |       |                                                        |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|
| No. <b>W 122484</b>                                                                                                                                    |                | Due no later than Feb 28, 2014                                                                                                                                                     |       | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>INCLINE PROPERTIES LLC<br>ANTONE LUEKENG<br>2500 W ORCHARD AVE<br>NAMPA ID 83651 |       | ANTONE LUEKENG<br>2500 W ORCHARD AVE<br>NAMPA ID 83651 |         |
|                                                                                                                                                        |                |                                                                                                                                                                                    |       | 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 |
| MEMBER                                                                                                                                                 | JEFF T LUEKENG | 610                                                                                                                                                                                | NAMPA | ID                                                     | USA     |
| Postal Code 83652                                                                                                                                      |                |                                                                                                                                                                                    |       |                                                        |         |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 122484</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Antone luekeng<br>Name (type or print): Antone luekeng<br>Date: 12/16/2013<br>Title: Manager                                       |       |                                                        |         |
| Processed 12/16/2013                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                          |       |                                                        |         |