| No. <b>W 71641</b>   | Due no later than Feb 28, 2011 2. Registered Agent and Address (NO PO E   |  |                |         | PO BOX)     |
|--|---|--|----------------|---------|-------------|
| Return to:   | Annual Report Form  | CORY IHLER                                 |                |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed.                        | 3930 E 5500 N<br>MALAD ID 83252            |                |         |             |
|  | IHLER SALES AND DISTRIBUTION, LLC<br>CORY W IHLER<br>3930 EAST 5500 NORTH | MALAD ID                                   | MALAU ID 83252 |         |             |
|  | MALAD ID 83252  | 3. <u>New</u> Registered Agent Signature:* |                |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   | USA   |  |                |         |             |
| 4. Limited Liability Companies: Enter N  | ames and Addresses of at least one Member or Manager.                     |  |                |         |             |
| Office Held Name   | Street or PO Address  | City                                       | State          | Country | Postal Code |
| MEMBER CORY IHLE   | R 3950 E 5500 N   | MALAD                                      | ID             | USA     | 83252       |
| 5. Organized Under the Laws of:  | 6. Annual Report must be signed.*   |  |                |         |             |
| ID   | Signature: Cory Ihler   | Date: 01/13/2011                           |                |         |             |
| W 71641  | Name (type or print): Cory Ihler  | Title: Owner                               |                |         |             |
| Processed 01/13/2011   | * Electronically provided signatures are accepted as original signatures. |  |                |         |             |