| No. <b>W 61016</b>   |               | Due no later than Mar 31, 2015  |                                      | 2 | 2. Registered Agent and Address (NO PO BOX)   |       |         |             |
|--|---------------|---|--------------------------------------|---|---|-------|---------|-------------|
| Return to:  SECRETARY OF STATE  700 WEST JEFFERSON  PO BOX 83720  BOISE, ID 83720-0080         |               | Annual Report Form  1. Mailing Address: Correct in this box if needed.  POCATELLO MAIN, L.L.C  MARJORIE SCHMAEHL  PO BOX 1492  KAMIAH ID 83536-1492 |                                      |   | MARJORIE SCHMAEHL 3250 HIWAY 12 MP 64 KAMIAH 83536  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |               |   |                                      |   |   |       |         |             |
| 4. Limited Liability Companie  | es: Enter Nai | mes and Addresse  | s of at least one Member or Manager. |   |   |       |         |             |
| Office Held  | Name          |   | Street or PO Address                 |   | City  | State | Country | Postal Code |
| MEMBER MARJORIE S  |               | SCHMAEHL  | PO BOX 1492                          |   | KAMIAH  | ID    |         | 83536       |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*   |                                      |   |   |       |         |             |
| ID   |               | Signature: Marjorie Schmaehl  |                                      |   | Date: 02/13/2015  |       |         |             |
| W 61016  |               | Name (type or print): Marjorie Schmaehl   |                                      |   | Title: Member   |       |         |             |
| Processed 02/13/2015 * Electronically provided signatures are accepted as original signatures. |               |   |                                      |   |   |       |         |             |