

|                                                                                                                                                        |              |                                                                                                                                          |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 75492</b>                                                                                                                                     |              | <b>Due no later than Jun 30, 2011</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><br>BTRE, LLC<br>3015 W MCMILLAN RD STE 103<br>MERIDIAN ID 83646            |       | SCOTT BISHOP<br>400 E CURLING DR<br>BOISE ID 83702 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                          |       | 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                                                                                                                                                 | SCOTT BISHOP | 400 E CURLING DR                                                                                                                         | BOISE | ID                                                 | USA     | 83702       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 75492</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Scott Bishop<br>Name (type or print): Scott Bishop<br>Date: 05/03/2011<br>Title: Officer |       |                                                    |         |             |  |
| Processed 05/03/2011                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                |       |                                                    |         |             |  |