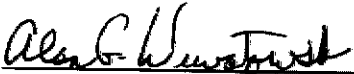


| No. W 7155 | Annual Report Form Due No Later Than November 30, 1999 | | 2. Registered Agent and Office NOT A P.O. BOX | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|--------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|---------|-----------------|---------------|---------|----|-------|---------|----------------|---------------|---------|----|-------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * | 1. Mailing Address - Please Correct, If Not Correct | | ALAN WIWATOWSKI 108 MAIN WEIPPE ID 83553 | | | | | | | | | | | | | | | | | | | |
| | AKW/ L.L.C. ALAN WIWATOWSKI PO BOX 2524 OROFINO ID 83544 | | 3. Organized Under the Laws of: ID W 7155 | | | | | | | | | | | | | | | | | | | |
| | 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Alan Wiwatowski</td> <td>P.O. Box 2524</td> <td>Orofino</td> <td>ID</td> <td>83544</td> </tr> <tr> <td>Manager</td> <td>Kim Wiwatowski</td> <td>P.O. Box 2524</td> <td>Orofino</td> <td>ID</td> <td>83544</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> | Manager | Alan Wiwatowski | P.O. Box 2524 | Orofino | ID | 83544 | Manager | Kim Wiwatowski | P.O. Box 2524 | Orofino | ID | 83544 |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | |
| Manager | Alan Wiwatowski | P.O. Box 2524 | Orofino | ID | 83544 | | | | | | | | | | | | | | | | | |
| Manager | Kim Wiwatowski | P.O. Box 2524 | Orofino | ID | 83544 | | | | | | | | | | | | | | | | | |
| 5. Signature of New Registered Agent | | 6. Signature <u></u> Date <u>7-12-99</u> Name (Typed or Printed) <u>Alan Wiwatowski</u> Title <u>Manager</u> | | | | | | | | | | | | | | | | | | | | |

ISSUED: 07-03-1999

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