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|--|---------------------|--|-------|---|---------|-------------|--|--|--|
| No. W 67084 | | Due no later than Sep 30, 2010 | | Annual Report Form | | | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. MCROBERTS INSURANCE AGENCY, LLC RICHARD LEE MCROBERTS 2216 S HAPPY VALLEY RD NAMPA ID 83686 USA | | RICHARD L MCROBERTS 2216 S HAPPY VALLEY RD NAMPA ID 83686 | | | | | |
| | | | | 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 | RICHARD L MCROBERTS | 2216 S HAPPY VALLEY RD | NAMPA | ID | USA | 83686 | | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID W 67084 | | Signature: Richard Lee McRoberts | | | | | | Date: 07/15/2010 | |
| | | Name (type or print): Richard Lee McRoberts | | | | | | Title: Member | |
| Processed 07/15/2010 | | * Electronically provided signatures are accepted as original signatures. | | | | | | | |