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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 37588</b>                                                                                                                                     |                | Due no later than Mar 31, 2013                                                                                                                                               |          | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>MARILYN K. YORE, LLC<br>MARILYN K. YORE<br>PO BOX 175<br>HAGERMAN ID 83332 |          | MARILYN K YORE<br>616 VALLEY CIRCLE ROAD<br>HAGERMAN ID 83332 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                              |          | 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                                                                                                                                                 | MARILYN K YORE | 616 VALLEY CIRCLE ROAD                                                                                                                                                       | HAGERMAN | ID                                                            | USA     | 83332       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 37588</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Marilyn Yore<br>Name (type or print): Marilyn Yore<br>Date: 01/23/2013<br>Title: Member                                      |          |                                                               |         |             |  |
| Processed 01/23/2013                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                    |          |                                                               |         |             |  |