

|  |                |   |      |  |         |                  |  |
|--|----------------|---|------|--|---------|------------------|--|
| No. <b>W 61021</b>   |                | <b>Due no later than Mar 31, 2013</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>SEVEN BEARS LLC<br>DENNIS WHEELER<br>PO BOX 105<br>UCON ID 83454 |      | NATHAN M OLSEN<br>2105 CORONADO ST<br>IDAHO FALLS ID 83404 |         |                  |  |
|  |                |   |      | 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      |  |
| MANAGER  | DENNIS WHEELER | PO BOX 105  | UCON | ID   | USA     | 83454            |  |
| MANAGER  | LOLA WHEELER   | PO BOX 105  | UCON | ID   | USA     | 83454            |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*   |      |  |         |                  |  |
| <b>ID<br/>W 61021</b>  |                | Signature: Dennis Wheeler   |      |  |         | Date: 01/30/2013 |  |
|  |                | Name (type or print): Dennis Wheeler  |      |  |         | Title: Manager   |  |
| Processed 01/30/2013   |                | * Electronically provided signatures are accepted as original signatures.   |      |  |         |                  |  |