

|                                                                                                                                                        |                |                                                                                                                                                          |         |                                                              |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------------------------------|---------|------------------|--|
| No. <b>C 184755</b>                                                                                                                                    |                | <b>Due no later than Oct 31, 2014</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>ALL CITIES MALL, INC.<br>KATHERINE A SELL<br>4120 CANYON CREEK ROAD<br>OROFINO ID 83544 |         | KATHERINE A SELL<br>4120 CANYON CREEK RD<br>OROFINO ID 83544 |         |                  |  |
|                                                                                                                                                        |                |                                                                                                                                                          |         | 3. <u>New</u> Registered Agent Signature:*                   |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                |                                                                                                                                                          |         |                                                              |         |                  |  |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                     | City    | State                                                        | Country | Postal Code      |  |
| TREASURER                                                                                                                                              | WILLIAM T SELL | 4120 CANYON CREEK ROAD                                                                                                                                   | OROFINO | ID                                                           | USA     | 83544            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                        |         |                                                              |         |                  |  |
| <b>ID<br/>C 184755</b>                                                                                                                                 |                | Signature: William T Sell                                                                                                                                |         |                                                              |         | Date: 09/15/2014 |  |
|                                                                                                                                                        |                | Name (type or print): William T Sell                                                                                                                     |         |                                                              |         | Title: Treasurer |  |
| Processed 09/15/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                |         |                                                              |         |                  |  |