

|                                                                                                                                                        |              |                                                                                                                                                |          |                                                          |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------|---------|------------------|--|
| No. <b>W 10863</b>                                                                                                                                     |              | <b>Due no later than Jan 31, 2012</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>TAHOE CONSTRUCTION, L.L.C.<br>JAKE CENTERS<br>P.O. BOX 1610<br>EAGLE ID 83616 |          | JAKE CENTERS<br>1979 N LOCUST GROVE<br>MERIDIAN ID 83646 |         |                  |  |
|                                                                                                                                                        |              |                                                                                                                                                |          | 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                                                                                                                                                 | JAKE CENTERS | 1979 N LOCUST GROVE                                                                                                                            | MERIDIAN | ID                                                       | USA     | 83646            |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                                                              |          |                                                          |         |                  |  |
| <b>ID<br/>W 10863</b>                                                                                                                                  |              | Signature: Jake Centers                                                                                                                        |          |                                                          |         | Date: 11/14/2011 |  |
|                                                                                                                                                        |              | Name (type or print): Jake Centers                                                                                                             |          |                                                          |         | Title: Agent     |  |
| Processed 11/14/2011                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                      |          |                                                          |         |                  |  |