

|                                                                                                                                                        |                |                                                                                                                                                           |       |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 86244</b>                                                                                                                                     |                | <b>Due no later than Aug 31, 2010</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>OASIS WEIGHT MANAGEMENT, LLC<br>JESSE MCMULLIN<br>3217 W BAVARIA ST<br>EAGLE ID 83616        |       | JESSE MCMULLIN<br>3217 W BAVARIA ST<br>EAGLE ID 83616 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                           |       | 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                                                                                                                                                | JESSE MCMULLIN | 3217 W BAVARIA STREET                                                                                                                                     | EAGLE | ID                                                    | USA     | 83616       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 86244</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Jesse McMullin<br>Name (type or print): Jesse McMullin<br>Date: 06/09/2010<br>Title: Office Administrator |       |                                                       |         |             |  |
| Processed 06/09/2010                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                 |       |                                                       |         |             |  |