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| No. W 83881 | Due no later than May 31, 2010 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | JEFFREY CLARK 180 N BROADWAY BLACKFOOT ID 83221 | | | |
| | RAHIM SUN VALLEY, LLC JEFFREY D CLARK PO BOX 986 BLACKFOOT ID 83221 | | 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 | FAHIM RAHIM | 444 HOSPITAL WAY | POCATELLO | ID | USA | 83201 |
| MEMBER | NAEEM RAHIM | 444 HOSPITAL WAY | POCATELLO | ID | USA | 83201 |
| 5. Organized Under the Laws of: ID W 83881 | 6. Annual Report must be signed.* | | | | | |
| | | Signature: Jeffrey Clark | Date: 03/15/2010 | | | |
| | | Name (type or print): Jeffrey Clark | Title: Cpa | | | |
| Processed 03/15/2010 | | * Electronically provided signatures are accepted as original signatures. | | | | |