

|  |                        |   |       |  |         |                  |  |
|--|------------------------|---|-------|--|---------|------------------|--|
| No. <b>W 114643</b>  |                        | <b>Due no later than Jun 30, 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>UX SCIENCE, LLC<br>STUART A RAGSDALE<br>1283 N LILLY AVE APT 102<br>BOISE ID 83713 |       | STUART AUSTIN RAGSDALE<br>1283 N LILLY AVE APT 102<br>BOISE ID 83713 |         |                  |  |
|  |                        |   |       | 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  | STUART AUSTIN RAGSDALE | 1283 N LILLY APT 102  | BOISE | ID   | USA     | 83713            |  |
| 5. Organized Under the Laws of:  |                        | 6. Annual Report must be signed.*   |       |  |         |                  |  |
| <b>ID<br/>W 114643</b>   |                        | Signature: Austin Ragsdale  |       |  |         | Date: 04/26/2013 |  |
|  |                        | Name (type or print): Austin Ragsdale   |       |  |         | Title: Manager   |  |
| Processed 04/26/2013   |                        | * Electronically provided signatures are accepted as original signatures.   |       |  |         |                  |  |