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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 21596</b>                                                                                                                                     |                 | <b>Due no later than Nov 30, 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>COUNTRYSIDE MANOR ENTERPRISES, LLC<br>BARBARA B OLSON<br>2480 HWY 52<br>PAYETTE ID 83661<br>USA |           | DWIGHT E OLSON<br>1204 JESSICA AVE<br>FRUITLAND ID 83619 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                              |           | 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                                                                                                                                                 | DWIGHT E OLSON  | 1204 JESSICA AVE                                                                                                                                             | FRUITLAND | ID                                                       | USA     | 83619       |  |
| MEMBER                                                                                                                                                 | BARBARA B OLSON | 1204 JESSICA AVE                                                                                                                                             | FRUITLAND | ID                                                       | USA     | 83619       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 21596</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Barbara B Olson<br>Name (type or print): Barbara B Olson                                                     |           |                                                          |         |             |  |
|                                                                                                                                                        |                 | Date: 09/17/2014<br>Title: Member                                                                                                                            |           |                                                          |         |             |  |
| Processed 09/17/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                    |           |                                                          |         |             |  |