

|                                                                                                                                                        |              |                                                                                                                                                    |       |                                                                  |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 33308</b>                                                                                                                                     |              | <b>Due no later than Sep 30, 2007</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>FOR 1031 TOLLVIEW LLC<br>12426 W EXPLORER DR STE 220<br>BOISE ID 83713            |       | GARY BRINGHURST<br>12426 W EXPLORER DR STE 220<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                                                                                                                                                | FOR 1031 LLC | 12426 W EXPLORER DR STE 220                                                                                                                        | BOISE | ID                                                               | USA     | 83713       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 33308</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Shannon Smith<br>Name (type or print): Shannon Smith<br>Date: 09/18/2007<br>Title: Legal Assistant |       |                                                                  |         |             |  |
| Processed 09/18/2007                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                          |       |                                                                  |         |             |  |