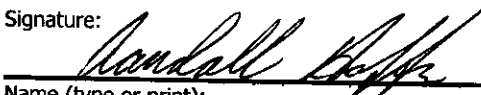


No. W 17248	Due no later than Dec 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) RANDY HOFFER 3679 E SHADY GLEN BOISE ID 83706
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TRINITY PARKS, L.L.C. RANDY HOFFER PO BOX 911 BOISE ID 83701		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	RANDALL HOFFER BOX 911 BOISE ID USA 83701		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MISTY LARA 1827 N. RAYMOND BOISE ID USA 83704		
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 17248 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature:  Name (type or print): <u>RANDALL HOFFER</u> </div> <div> Date: <u>2-11-2014</u> Title: <u>MANAGER</u> </div> </div>	
Issued 02/07/2014 by SLD		111926	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM