| No. <b>W 29277</b>   |  | Due no later than Mar 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  TIM SMALLEY CONSTRUCTION, L.L.C. KAREN L SMALLEY 4579-A RIVER RD BUHL ID 83316  mes and Addresses of at least one Member or Manager. |  | 2. Registered        | 2. Registered Agent and Address (NO PO BOX)  TIMOTHY E SMALLEY 4579-A RIVER RD BUHL 83316  3. New Registered Agent Signature:* |         |                               |  |
|--|--|---|--|----------------------|--|---------|-------------------------------|--|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |  |   |  | 4579-A RI            |  |         |                               |  |
|  |  |   |  | 3. <u>New</u> Regis  |  |         |                               |  |
| Office Held  |  | nes and Address   | 10.00  | Cib                  | Ctata  | Country | Doctal Code                   |  |
| MEMBER<br>MEMBER   | Name<br>TIMOTHY E SMALLEY<br>KAREN L SMALLEY |   | Street or PO Address<br>4579-A RIVER RD<br>4579-A RIVER RD | City<br>BUHL<br>BUHL | State<br>ID<br>ID  | Country | Postal Code<br>83316<br>83316 |  |
| 5. Organized Under the Laws of:  |  | 6. Annual Report must be signed.*   |  |                      |  |         |                               |  |
| ID   |  | Signature: Ka   |  | Date: 02/02/2015     |  |         |                               |  |
| W 29277  |  | Name (type o  |  | Title: Bookkeeper    |  |         |                               |  |
| Processed 02/02/2015 * Electronically provided signatures are accepted as original signatures.                             |  |   |  |                      |  |         |                               |  |