

|  |               |  |             |  |         |             |  |
|--|---------------|--|-------------|--|---------|-------------|--|
| No. <b>W 2965</b>  |               | <b>Due no later than Sep 30, 2009</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 WOODTURNERS, L.L.C.<br>D RENEE FITCH<br>878 COUNTRYSIDE LN<br>IDAHO FALLS ID 83404-7600 |             | D RENEE FITCH<br>878 COUNTRYSIDE LN<br>IDAHO FALLS ID 83404-7600 |         |             |  |
|  |               |  |             | 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  | D RENEE FITCH | 878 COUNTRYSIDE LN   | IDAHO FALLS | ID   | USA     | 83404-7600  |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 2965</b>  |               | 6. Annual Report must be signed.*<br>Signature: D Renee Fitch<br>Name (type or print): D Renee Fitch<br>Date: 08/14/2009<br>Title: Member Manager                |             |  |         |             |  |
| Processed 08/14/2009   |               | * Electronically provided signatures are accepted as original signatures.  |             |  |         |             |  |