


No. W 7499	Due no later than Dec 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA																																			
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. RATHDRUM POWER, LLC ANNE REECE AUTHORIZED PERSON POWER PLANT MGMT SERVICES, LLC 10710 SIKES PLACE, SUITE 300 CHARLOTTE NC 28277 USA Carol Faucher Authorized Person Polaris Rathdrum, LLC 7500 College Blvd Suite 400 Overland Park, KS 66210 USA		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Polaris Rathdrum, LLC</td> <td>7500 College Blvd, Suite 400</td> <td>Overland Park,</td> <td>KS</td> <td></td> <td>66210</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Polaris Rathdrum, LLC	7500 College Blvd, Suite 400	Overland Park,	KS		66210	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: DELAWARE W 7499	6. Signature:  Name (type or print): Jessica Heimann			Date: 12/20/2013 Title: POA																																		
Issued 12/20/2013 by J1 102481																																						