

|  |                   |  |                  |   |         |             |  |
|--|-------------------|--|------------------|---|---------|-------------|--|
| No. <b>W 3008</b>  |                   | <b>Due no later than Oct 31, 2010</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>SCHMIER FAMILY LLC (THE)<br>STEPHEN E MARTIN<br>PO BOX 3189<br>IDAHO FALLS ID 83403 |                  | STEPHEN E. MARTIN<br>425 S HOLMES AVE<br>IDAHO FALLS ID 83401 |         |             |  |
|  |                   |  |                  | 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  | JERALD D SCHMIER  | PO BOX 669   | W<br>YELLOWSTONE | MT  | USA     | 59758       |  |
| MANAGER  | R VERLENE SCHMIER | PO BOX 669   | W<br>YELLOWSTONE | MT  | USA     | 59758       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 3008</b>  |                   | 6. Annual Report must be signed.*<br>Signature: Stephen E. Martin<br>Name (type or print): Stephen E. Martin                                     |                  |   |         |             |  |
| Date: 08/13/2010<br>Title: Attorney  |                   |  |                  |   |         |             |  |
| Processed 08/13/2010   |                   | * Electronically provided signatures are accepted as original signatures.  |                  |   |         |             |  |