

No. W 228	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, if Not Correct COLUMBIA 7 LIMITED LIABILITY MICHAEL W. KAUFMAN 2985 MAYFAIR RIDGE LEWISTON ID 83501		MICHAEL W. KAUFMAN 2985 MAYFAIR RIDGE LEWISTON ID 83501 3. Organized Under the Laws of: ID W 228													
* FIRST NOTICE *																
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☒ Managers or ☐ Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>MICHAEL KAUFMAN</td> <td>2985 MAYFAIR RIDGE</td> <td>LEWISTON</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	MICHAEL KAUFMAN	2985 MAYFAIR RIDGE	LEWISTON	ID	83501
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MANAGER	MICHAEL KAUFMAN	2985 MAYFAIR RIDGE	LEWISTON	ID	83501											
5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature</td> <td><u>Michael Kaufman</u></td> <td>Date</td> <td><u>9-3-99</u></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><u>MICHAEL KAUFMAN</u></td> <td>Title</td> <td><u>MANAGER</u></td> </tr> </table>			Signature	<u>Michael Kaufman</u>	Date	<u>9-3-99</u>	Name (Typed or Printed)	<u>MICHAEL KAUFMAN</u>	Title	<u>MANAGER</u>				
Signature	<u>Michael Kaufman</u>	Date	<u>9-3-99</u>													
Name (Typed or Printed)	<u>MICHAEL KAUFMAN</u>	Title	<u>MANAGER</u>													

ISSUED: 07-03-1999

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