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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------|---------|-------------|--|
| No. <b>W 40836</b>                                                                                                                                     |                    | <b>Due no later than Jul 31, 2012</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>NBI, L.L.C.<br>PATRICK T PLANAGAN<br>PO. BOX 640<br>TROY ID 83871 |      | PATRICK T PLANAGAN<br>1746 HIWAY 99<br>TROY ID 83871 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                                     |      | 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 |  |
| MEMBER                                                                                                                                                 | PATRICK T PLANAGAN | PO BOX 640                                                                                                                                                          | TROY | ID                                                   | USA     | 83871       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 40836</b>                                                                                           |                    | 6. Annual Report must be signed.*<br>Signature: Patrick Planagan<br>Name (type or print): Patrick Planagan<br>Date: 05/17/2012<br>Title: Member                     |      |                                                      |         |             |  |
| Processed 05/17/2012                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                           |      |                                                      |         |             |  |