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| No. W 121564 | Due no later than Feb 28, 2014 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | TROY L SUMMERS 501 N 3RD ST MCCALL ID 83638 | | | |
| | SUMMERTIME LLC TROY SUMMERS PO BOX 2691 MCCALL ID 83638 UNITED STATES | | 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 | JENNIFER SUMMERS | PO BOX 2691 | MCCALL | ID | USA | 83638 |
| 5. Organized Under the Laws of: ID W 121564 | | 6. Annual Report must be signed.* Signature: Troy Summers Name (type or print): Troy Summers | | Date: 12/19/2013 Title: President | | |
| Processed 12/19/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | |