| No. W 34317 | | | Due no later than Nov 30, 2012 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---------------|-------------------------------------|---|----------|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | Annual Report Form 1. Mailing Address: Correct in this box if needed. SYSTEM GROUP, LLC (THE) BRAD CORL 5920 N DEMILLE AVE MERIDIAN ID 83646 | | BRAD CORL 5920 N DEMILLE AVE MERIDIAN ID 83646 3. New Registered Agent Signature:* | | | |
| | | SYSTEM GF BRAD COR 5920 N DEN | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | nies: Enter l | Names and Addre | sses of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | BRAD D. CORL | | 5920 N DEMILLE AVE | MERIDIAN | ID | USA | 83642-0569 | |
| 5. Organized Under the Laws of: | | 6. Annual Rep | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: | Signature: Brad Corl | | Date: 10/03/2012 | | | |
| W 34317 | | Name (type | Name (type or print): Brad Corl | | Title: Owner | | | |
| Processed 10/03/2012 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |