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|--|------------------------|---|--|---|-------------|----------------|----------------------|
| No. W 66344 | | Due no later than Sep 30, 2011 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 | | 1. Mailing Address: Correct in this box if needed. TAILWIND, LLC THOMAS D. GWINN 500 MICHAEL AVE POCATELLO ID 83201 | | THOMAS D GWINN 500 MICHAEL AVE POCATELLO ID 83201 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MEMBER | Name THOMAS D GWINN | Street or PO Address 500 MICHAEL AVE | | City POCATELLO | State ID | Country USA | Postal Code 83201 |
| 5. Organized Under the Laws of: ID W 66344 | | 6. Annual Report must be signed.* Signature: Thomas D. Gwinn Name (type or print): Thomas D. Gwinn Date: 08/10/2011 Title: Member | | | | | |
| Processed 08/10/2011 * Electronically provided signatures are accepted as original signatures. | | | | | | | |