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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------|----------------------------------|-------------|--|
| No. <b>W 81205</b>                                                                                                                                     |                          | <b>Due no later than Feb 29, 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>1. Mailing Address: Correct in this box if needed.</b><br>RIVERSTONE BUSINESS SERVICES, LLC<br>CYNTHIA FIELDS BELVEAL<br>2925 E GEORGIA AVE<br>NAMPA ID 83686 |       | CYNTHIA FIELDS BELVEAL<br>2925 E GEORGIA AVE<br>NAMPA ID 83686 |                                  |             |  |
|                                                                                                                                                        |                          |                                                                                                                                                                  |       | 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                                                                                                                                                 | CYNTHIA L FIELDS BELVEAL | 2925 E GEORGIA AVE                                                                                                                                               | NAMPA | ID                                                             | USA                              | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 81205</b>                                                                                           |                          | 6. Annual Report must be signed.*<br>Signature: Cynthia Fields Belveal<br>Name (type or print): Cynthia Fields Belveal                                           |       |                                                                | Date: 01/16/2012<br>Title: Owner |             |  |
| Processed 01/16/2012                                                                                                                                   |                          | * Electronically provided signatures are accepted as original signatures.                                                                                        |       |                                                                |                                  |             |  |