

|  |                |  |             |  |                  |             |  |
|--|----------------|--|-------------|--|------------------|-------------|--|
| No. <b>W 85440</b>   |                | <b>Due no later than Jul 31, 2010</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>ELISON INVESTMENT PROPERTIES, LLC<br>MICHAEL ELISON<br>3456 E 17TH #140<br>AMMON ID 83406 |             | MICHAEL ELISON<br>3656 WASHINGTON PKWY<br>IDAHO FALLS ID 83404 |                  |             |  |
|  |                |  |             | 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   | MICHAEL ELISON | 3656 WASHINGTON PKWY   | IDAHO FALLS | ID   | USA              | 83404       |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |             |  |                  |             |  |
| <b>ID<br/>W 85440</b>  |                | Signature: Robert Crandall   |             |  | Date: 05/17/2010 |             |  |
|  |                | Name (type or print): Robert Crandall  |             |  | Title: Attorney  |             |  |
| Processed 05/17/2010   |                | * Electronically provided signatures are accepted as original signatures.  |             |  |                  |             |  |