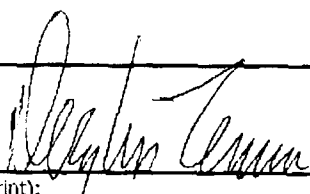


No. W 21485	Due no later than Nov 30, 2015 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) DOUGLAS W TAMURA 424 SANTA MARIA DR BOISE ID 83712
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. FAIRVIEW LAKES, L.L.C. 1124 SANTA MARIA BOISE ID 83702	3. <u>New</u> Registered Agent Signature.

4. **Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DOUG TAMURA	1124 SANTA MARIA	BOISE,	ID	USA	83712
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 21485</div>	6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): DOUGLAS TAMURA </div> <div style="width: 35%;"> Date: 10/19/15 <hr/> Title: MEMBER </div> </div>
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