

|                                                                                                                                                        |                 |                                                                                                                                            |       |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 66098</b>                                                                                                                                     |                 | <b>Due no later than Aug 31, 2014</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><br>SOUTH FORK LAND, LLC<br>PAUL H MARTIN<br>3852 E. 300 N.<br>RIGBY ID 83442 |       | KLIFF BRAMWELL<br>3852 EAST 300 NORTH<br>RIGBY ID 83442 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                            |       | 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                                                                                                                                                 | KLIFF BRAMWELL  | 3852 EAST 300 NORTH                                                                                                                        | RIGBY | ID                                                      | USA     | 83442       |  |
| MEMBER                                                                                                                                                 | PAUL H MARTIN   | 3852 EAST 300 NORTH                                                                                                                        | RIGBY | ID                                                      | USA     | 83442       |  |
| MEMBER                                                                                                                                                 | MARK A BRAMWELL | 3852 EAST 300 NORTH                                                                                                                        | RIGBY | ID                                                      | USA     | 83442       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 66098</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Paul Martin<br>Name (type or print): Paul Martin                                           |       |                                                         |         |             |  |
|                                                                                                                                                        |                 | Date: 06/20/2014<br>Title: President                                                                                                       |       |                                                         |         |             |  |
| Processed 06/20/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                  |       |                                                         |         |             |  |