

No. W 91367	Due no later than Mar 31, 2013 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CENTERPOINT CAPITAL PARTNERS LLC JOEL PHILLIPS PO BOX 2986 POCATELLO ID 83206		JOEL PHILLIPS 275 S. 5TH AVE STE 151 POCATELLO ID 83201			
			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	JOEL PHILLIPS	PO BOX 2986	POCATELLO	ID	USA	83206
5. Organized Under the Laws of: ID W 91367		6. Annual Report must be signed.* Signature: Joel Phillips Name (type or print): Joel Phillips Date: 02/16/2013 Title: Member				
Processed 02/16/2013		* Electronically provided signatures are accepted as original signatures.				