

|  |                    |   |          |   |                         |             |  |
|--|--------------------|---|----------|---|-------------------------|-------------|--|
| No. <b>W 10620</b>   |                    | <b>Due no later than Dec 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>Annual Report Form</b>   |          | MICHAEL R LINDSTROM<br>877 W MAIN ST STE 805<br>BOISE 83702 |                         |             |  |
|  |                    | <b>1. Mailing Address: Correct in this box if needed.</b>                         |          | 3. <u>New</u> Registered Agent Signature:*                  |                         |             |  |
|  |                    | CT LEASING, LLC<br>MICHAEL R LINDSTROM<br>877 W MAIN ST STE 800<br>BOISE ID 83702 |          |   |                         |             |  |
| 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   | D SCOTT TOLLESTRUP | 1131 E HACKAMORE DR   | DRAPER   | UT  | USA                     | 84020       |  |
| MEMBER   | W CHARLES COOMBS   | 1612 N 1100 W   | MAPLETON | UT  | USA                     | 84664       |  |
| 5. Organized Under the Laws of:  |                    | 6. Annual Report must be signed.*   |          |   |                         |             |  |
| <b>ID<br/>W 10620</b>  |                    | Signature: Michael R. Lindstrom   |          |   | Date: 10/16/2014        |             |  |
|  |                    | Name (type or print): Michael R. Lindstrom  |          |   | Title: Registered Agent |             |  |
| Processed 10/16/2014   |                    | * Electronically provided signatures are accepted as original signatures.         |          |   |                         |             |  |