

|  |                                     |  |  |   |             |                |                      |
|--|-------------------------------------|--|--|---|-------------|----------------|----------------------|
| No. <b>W 101209</b>  |                                     | <b>Due no later than Mar 31, 2012</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )  |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                                     | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>SOMBOD L.L.C.<br>CLARK ROBINSON<br>PO BOX 1942<br>NAMPA ID 83653                    |  | TIDON C ROBINSON<br>8605 DIAMOND CT<br>NAMPA ID 83686 |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                                     |  |  | 3. <u>New</u> Registered Agent Signature:*            |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                                     |  |  |   |             |                |                      |
| Office Held<br>MANAGER   | Name<br>CLARK MIDDLE_NAME) ROBINSON | Street or PO Address<br>PO BOX 1942  |  | City<br>NAPA  | State<br>ID | Country<br>USA | Postal Code<br>83653 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 101209</b>                                |                                     | 6. Annual Report must be signed.*<br><br>Signature: Clark Robinson<br>Name (type or print): Clark Robinson<br><br>Date: 01/07/2012<br>Title: Manager |  |   |             |                |                      |
| Processed 01/07/2012 * Electronically provided signatures are accepted as original signatures.     |                                     |  |  |   |             |                |                      |