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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------|---------------------|
| No. <b>W 94561</b>                                                                                                                                     |               | <b>Due no later than Jul 31, 2013</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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>LATERAL CONCEPTS, LLC<br>BRAD L PENSKE<br>4136 WIRTH DR<br>COEUR D ALENE ID 83815<br>USA |               | BRAD PENSKE<br>4136 WIRTH DR<br>COEUR D ALENE ID 83815 |                     |
|                                                                                                                                                        |               |                                                                                                                                                                                            |               | 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 |
| MANAGER                                                                                                                                                | BRAD L PENSKE | 4136 WIRTH DR                                                                                                                                                                              | COEUR D ALENE | ID                                                     | USA 83815           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 94561</b>                                                                                           |               | 6. Annual Report must be signed.*<br>Signature: Brad L. Penske<br>Name (type or print): Brad L. Penske<br>Date: 07/07/2013<br>Title: Owner                                                 |               |                                                        |                     |
| Processed 07/07/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                                  |               |                                                        |                     |