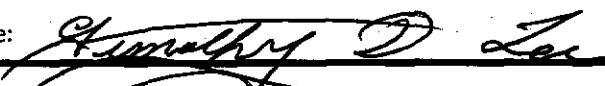
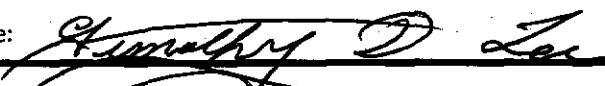
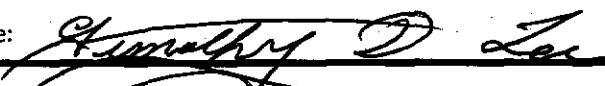


| No. W 33831 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | Due no later than Oct 31, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. AARONDALE INVESTMENT, LLC TIMOTHY D LEE P O BOX 1329 KAMIAH ID 83536 | 2. Registered Agent and Office (NOT A P.O. BOX) TIMOTHY D LEE 909 IDAHO ST KAMIAH ID 83536 3. <u>New</u> Registered Agent Signature. | | | | | | | | | | | | | | | | | | |
|---|---|--|---|----------------------|--------------------------------------|----------------|---------|-------------|------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member. Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td colspan="6"> Manager <u>Member</u> (circle one) </td> </tr> <tr> <td colspan="6" style="height: 100px; vertical-align: top;"> <div style="font-family: cursive; font-size: 1.2em;"> Marta V. Lee P.O. Box 1329 Kamiah ID Lewis 83536 </div> </td> </tr> </tbody> </table> | | | Manager or Member. Name | Street or PO Address | City | State | Country | Postal Code | Manager <u>Member</u> (circle one) | | | | | | <div style="font-family: cursive; font-size: 1.2em;"> Marta V. Lee P.O. Box 1329 Kamiah ID Lewis 83536 </div> | | | | | |
| Manager or Member. Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | |
| Manager <u>Member</u> (circle one) | | | | | | | | | | | | | | | | | | | | |
| <div style="font-family: cursive; font-size: 1.2em;"> Marta V. Lee P.O. Box 1329 Kamiah ID Lewis 83536 </div> | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 33831</div> | 6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: </td> <td style="width: 40%;">Date: 10/5/11</td> </tr> <tr> <td>Name (type or print): Timothy D. Lee</td> <td>Title: Manager</td> </tr> </table> | | Signature:  | Date: 10/5/11 | Name (type or print): Timothy D. Lee | Title: Manager | | | | | | | | | | | | | | |
| Signature:  | Date: 10/5/11 | | | | | | | | | | | | | | | | | | | |
| Name (type or print): Timothy D. Lee | Title: Manager | | | | | | | | | | | | | | | | | | | |
| Issued 09/02/2011 by KAH 130368 | | | | | | | | | | | | | | | | | | | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM