

No. W 32864		Due no later than Aug 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		1. Mailing Address: Correct in this box if needed. S.S. OLSON, L.L.C. STEPHEN S OLSON PO BOX 256 MALAD ID 83252 USA		STEPHEN SPENCER OLSON 610 SATTLEBROOK MALAD ID 83252			
NO FILING FEE IF RECEIVED BY DUE DATE				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	SPENCER J OLSON	610 SADDLEBROOK	MALAD	ID	USA	83252	
MANAGER	STEPHEN SPENCER OLSON	610 SADDLEBROOK	MALAD	ID	USA	83252	
5. Organized Under the Laws of: ID W 32864		6. Annual Report must be signed.* Signature: Stephen Olson Name (type or print): Stephen Olson					
		Date: 06/27/2013 Title: Manager					
Processed 06/27/2013		* Electronically provided signatures are accepted as original signatures.					