| No. W 108465 | | Due no later than Nov 30, 2012 | | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------------|--|---------------------------------|-----------------------|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. MDWILLIAMS LLC. GREG WILLIAMS 508 BROOKDALE BOISE ID 83712 | | 508 BROOM BOISE ID | GREG WILLIAMS 508 BROOKDALE BOISE ID 83712 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 4. Limited Liability Compa | nies: Enter Na | mes and Addresses of | at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | SHELLY WILLIAMS | | 3177 S. KRAMER LN | BOISE | ID | USA | 83706 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Greg Williams | | | Date: 12/29/2012 | | | |
| W 108465 | | Name (type or print): Greg Williams | | | Title: Member | | | |
| Processed 12/29/2012 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |