

|                                                                                                                                                        |                |                                                                                                                                                                                        |       |                                                            |         |                       |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|-----------------------|--|
| No. <b>W 74434</b>                                                                                                                                     |                | <b>Due no later than May 31, 2012</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>BRAINTREE CAPITAL, LLC<br>RYAN VAN ALFEN<br>420 E STATE ST STE 130<br>EAGLE ID 83616 |       | RYAN VAN ALFEN<br>420 E STATE ST STE 130<br>EAGLE ID 83616 |         |                       |  |
|                                                                                                                                                        |                |                                                                                                                                                                                        |       | 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           |  |
| MEMBER                                                                                                                                                 | RYAN VAN ALFEN | 420 E STATE ST STE 130                                                                                                                                                                 | EAGLE | ID                                                         | USA     | 83616                 |  |
| MEMBER                                                                                                                                                 | JASON KOTTER   | 420 E STATE ST STE 130                                                                                                                                                                 | EAGLE | ID                                                         | USA     | 83616                 |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                                                      |       |                                                            |         |                       |  |
| <b>ID<br/>W 74434</b>                                                                                                                                  |                | Signature: Rose Walker                                                                                                                                                                 |       |                                                            |         | Date: 03/15/2012      |  |
|                                                                                                                                                        |                | Name (type or print): Rose Walker                                                                                                                                                      |       |                                                            |         | Title: Authorized Rep |  |
| Processed 03/15/2012                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                              |       |                                                            |         |                       |  |