

|                                                                                                                                                        |                    |                                                                                                                                                      |        |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 56091</b>                                                                                                                                     |                    | <b>Due no later than Nov 30, 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>1. Mailing Address: Correct in this box if needed.</b><br><br>COW GULCH RANCH LLC<br>DAVID RUSSELL BELL<br>924 S 1325 E<br>ALBION ID 83311<br>USA |        | DAVID RUSSELL BELL<br>924 S 1325 E<br>ALBION ID 83311 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                      |        | 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                                                                                                                                                 | DAVID RUSSELL BELL | 924 S 1325 E                                                                                                                                         | ALBION | ID                                                    | USA     | 83311       |  |
| MEMBER                                                                                                                                                 | SHARI BELL         | 924 S 1325 E                                                                                                                                         | ALBION | ID                                                    | USA     | 83311       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 56091</b>                                                                                           |                    | 6. Annual Report must be signed.*<br>Signature: David Russell Bell<br>Name (type or print): David Russell Bell                                       |        |                                                       |         |             |  |
| Date: 09/19/2013<br>Title: Member                                                                                                                      |                    |                                                                                                                                                      |        |                                                       |         |             |  |
| Processed 09/19/2013                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                            |        |                                                       |         |             |  |