

No. W 4584	Due no later than Sep 30, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		RON ARNOLD 21 N PINE AVE SUGAR CITY ID 83448			
	CLOUD NINE, L.L.C. RON ARNOLD 21 N PINE AVE SUGAR CITY ID 83448		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	RON ARNOLD	21 N PINE AVE	SUGAR CITY	ID	USA	83448
5. Organized Under the Laws of: ID W 4584		6. Annual Report must be signed.* Signature: Ron Arnold Name (type or print): Ron Arnold Date: 11/06/2013 Title: Manager				
Processed 11/06/2013		* Electronically provided signatures are accepted as original signatures.				