

No. W 40754	Due no later than Jun 30, 2011 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) JAMES R LINTON 3334 HIGHWAY 57 PRIEST RIVER ID 83856
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. LINTON FAMILY, LLC 3334 HIGHWAY 57 PRIEST RIVER ID 83856	3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager Member (circle one)						
manager	(James R. Linton)	3334 Hwy 57	Priest River	Idaho	Bonner	83856
manager	Joann M. Linton	3334 Hwy 57	Priest River	Idaho	Bonner	83856
manager	James R. (Sonny) Linton	Box 600	Priest River	Idaho	Bonner	83856
manager	Daniel Steven Linton	1495 Riverside Rd.	Priest River	Idaho	Bonner	83856
manager	Gregory Dean Linton	Box 2377	Priest River	Idaho	Bonner	83856

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 40754</div>	6. <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Signature: <u>James R Linton</u></td> <td style="border: none; text-align: right;">Date: <u>4-11-11</u></td> </tr> <tr> <td style="border: none;">Name (type or print): <u>JAMES R LINTON</u></td> <td style="border: none; text-align: right;">Title: <u>MANAGER</u></td> </tr> </table>	Signature: <u>James R Linton</u>	Date: <u>4-11-11</u>	Name (type or print): <u>JAMES R LINTON</u>	Title: <u>MANAGER</u>
Signature: <u>James R Linton</u>	Date: <u>4-11-11</u>				
Name (type or print): <u>JAMES R LINTON</u>	Title: <u>MANAGER</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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