

|                                                                                                                                                        |                     |                                                                                                                                                       |              |                                                              |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>W 22328</b>                                                                                                                                     |                     | <b>Due no later than Jan 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>1. Mailing Address: Correct in this box if needed.</b><br><br>BUBBA-MAC LAND, LLC<br>BARBARA J MCCORMICK<br>2120 E MARYLAND AVE<br>NAMPA ID 83686  |              | BARBARA J MCCORMICK<br>2120 E MARYLAND AVE<br>NAMPA ID 83686 |         |             |  |
|                                                                                                                                                        |                     |                                                                                                                                                       |              | 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                                                                                                                                                 | BARBARA J MCCORMICK | 2120 E MARYLAND AVE                                                                                                                                   | NAMPA        | ID                                                           | USA     | 83686       |  |
| MEMBER                                                                                                                                                 | JOHN L MCCORMICK IV | 13 SPINAKER PL                                                                                                                                        | REDWOOD CITY | CA                                                           | USA     | 94065       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 22328</b>                                                                                           |                     | 6. Annual Report must be signed.*<br>Signature: Barbara J McCormick<br>Name (type or print): Barbara J McCormick<br>Date: 02/05/2012<br>Title: Member |              |                                                              |         |             |  |
| Processed 02/05/2012                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                             |              |                                                              |         |             |  |