

|                                                                                                                                                        |                     |                                                                                                                                                                  |           |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 45525</b>                                                                                                                                     |                     | <b>Due no later than Dec 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>BULLOCK DIVERSIFIED, LLC<br>KIMBERLEY M BULLOCK<br>1671 ARDELLA DR<br>POCATELLO ID 83201<br>USA |           | ERICK F BULLOCK<br>1671 ARDELLA DR<br>POCATELLO ID 83201 |         |             |  |
|                                                                                                                                                        |                     |                                                                                                                                                                  |           | 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                                                                                                                                                 | ERICK F BULLOCK     | 1671 ARDELLA DR                                                                                                                                                  | POCATELLO | ID                                                       | USA     | 83201       |  |
| MEMBER                                                                                                                                                 | KIMBERLEY M BULLOCK | 1671 ARDELLA DR                                                                                                                                                  | POCATELLO | ID                                                       | USA     | 83201       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 45525</b>                                                                                           |                     | 6. Annual Report must be signed.*<br>Signature: Kimberley M. Bullock<br>Name (type or print): Kimberley M. Bullock<br>Date: 11/28/2012<br>Title: Owner/Member    |           |                                                          |         |             |  |
| Processed 11/28/2012                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                        |           |                                                          |         |             |  |