

|                                                                                                                                                        |                 |                                                                                                                                                       |             |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 26308</b>                                                                                                                                     |                 | <b>Due no later than Oct 31, 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>R & L COLLETTE MANAGEMENT, LLC<br>ROBERT COLLETTE<br>5238 S 11 E<br>IDAHO FALLS ID 83404 |             | STEPHEN H TELFORD<br>2105 CORONADO<br>IDAHO FALLS ID 83404 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                       |             | 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                                                                                                                                                | ROBERT COLLETTE | 5238 S 11 E                                                                                                                                           | IDAHO FALLS | ID                                                         | USA     | 83404       |  |
| MANAGER                                                                                                                                                | LESLIE COLLETTE | 5238 S 11 E                                                                                                                                           | IDAHO FALLS | ID                                                         | USA     | 83404       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 26308</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Robert Collette<br>Name (type or print): Robert Collette                                              |             |                                                            |         |             |  |
|                                                                                                                                                        |                 | Date: 08/22/2013<br>Title: Manager                                                                                                                    |             |                                                            |         |             |  |
| Processed 08/22/2013                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                             |             |                                                            |         |             |  |