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| No. W 71121 | Due no later than Feb 28, 2011 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. EAST END, LLC MICHAEL J SWOPE 223 N 6TH ST STE 425 BOISE ID 83702 | | MICHAEL J SWOPE 223 N 6TH ST STE 425 BOISE ID 83702 | | | |
| | | | 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 | MICHAEL J SWOPE | 223 N 6TH ST STE 425 | BOISE | ID | USA | 83702 |
| 5. Organized Under the Laws of: ID W 71121 | 6. Annual Report must be signed.* Signature: Michael J Swope Name (type or print): Michael J Swope | | Date: 12/14/2010 Title: Manager | | | |
| Processed 12/14/2010 | | * Electronically provided signatures are accepted as original signatures. | | | | |