

|                                                                                                                                                        |            |                                                                                                                                             |        |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 42660</b>                                                                                                                                     |            | <b>Due no later than Sep 30, 2011</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>MOUNTAIN VALLEY INSPECTIONS LLC<br>JOE RICHES<br>PO BOX 848<br>MCCALL ID 83638 |        | JOE RICHES<br>519 BRUNDAGE DR<br>MCCALL ID 83638   |         |                  |  |
|                                                                                                                                                        |            |                                                                                                                                             |        | 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                                                                                                                                                 | JOE RICHES | PO BOX 848                                                                                                                                  | MCCALL | ID                                                 | USA     | 83638            |  |
| 5. Organized Under the Laws of:                                                                                                                        |            | 6. Annual Report must be signed.*                                                                                                           |        |                                                    |         |                  |  |
| <b>ID<br/>W 42660</b>                                                                                                                                  |            | Signature: Joe Riches                                                                                                                       |        |                                                    |         | Date: 08/04/2011 |  |
|                                                                                                                                                        |            | Name (type or print): Joe Riches                                                                                                            |        |                                                    |         | Title: President |  |
| Processed 08/04/2011                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                   |        |                                                    |         |                  |  |