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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 48655</b>                                                                                                                                     |                 | <b>Due no later than Mar 31, 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>PSF ARCO, AN IDAHO LIMITED LIABILITY COMPANY<br>DIRK PARKINSON<br>PO BOX 326<br>ST ANTHONY ID 83445 |             | DIRK PARKINSON<br>3419 E HOG HOLLOW RD<br>ST ANTHONY ID 83445 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                  |             | 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                                                                                                                                                 | DIRK PARKINSON  | PO BOX 326                                                                                                                                                       | ST ANTHONY  | ID                                                            | USA     | 83445       |  |
| MEMBER                                                                                                                                                 | ROBYN PARKINSON | PO BOX 326                                                                                                                                                       | ST. ANTHONY | ID                                                            | USA     | 83445       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 48655</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Dirk Parkinson<br>Name (type or print): Dirk Parkinson                                                           |             |                                                               |         |             |  |
|                                                                                                                                                        |                 | Date: 01/22/2011<br>Title: Member                                                                                                                                |             |                                                               |         |             |  |
| Processed 01/22/2011                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                        |             |                                                               |         |             |  |