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| No. W 73746 | | Due no later than Apr 30, 2012 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 | | 1. Mailing Address: Correct in this box if needed. LSB LLC LAURIE BAIRD GAFFNEY 591 PARK AVE STE 302 IDAHO FALLS ID 83402 | | LAURIE BAIRD GAFFNEY 591 PARK AVENUE, STE. 302 IDAHO FALLS ID 83402 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MEMBER | Name LAURIE BAIRD GAFFNEY | Street or PO Address 591 PARK AVE STE 302 | | City IDAHO FALLS | State ID | Country USA | Postal Code 83402 |
| 5. Organized Under the Laws of: ID W 73746 | | 6. Annual Report must be signed.* Signature: Laurie Baird Gaffney Name (type or print): Laurie Baird Gaffney Date: 06/13/2012 Title: Member | | | | | |
| Processed 06/13/2012 * Electronically provided signatures are accepted as original signatures. | | | | | | | |