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| No. W 75206 | Due no later than Jun 30, 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. COLE CREEK TAXIDERM MY LLC RULON JONES PO BOX 472 FIRTH ID 83236 | RULON JONES 122 S. MAIN FIRTH ID 83236 | |
| | | 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 | RULON JONES | 122 S. MAIN | FIRTH ID USA 83236 |
| MANAGER | KATHY JONES | 122 S. MAIN | FIRTH ID USA 83236 |
| 5. Organized Under the Laws of: ID W 75206 | 6. Annual Report must be signed.* Signature: Rulon Jones Name (type or print): Rulon Jones | | Date: 04/14/2011 Title: Manager |
| Processed 04/14/2011 | | * Electronically provided signatures are accepted as original signatures. | |