

|                                                                                                                                                        |                 |                                                                                                                                                  |         |                                                               |         |                       |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------|---------|-----------------------|--|
| No. <b>C 84233</b>                                                                                                                                     |                 | <b>Due no later than Jun 30, 2012</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>KELLOGG PLASTICS, LTD.<br>DONALD D. RUMPEL<br>P.O. BOX 549<br>SMELTERVILLE ID 83868 |         | DONALD D. RUMPEL<br>113 EAST MAIN ST<br>SMELTERVILLE ID 83868 |         |                       |  |
|                                                                                                                                                        |                 |                                                                                                                                                  |         | 3. <u>New</u> Registered Agent Signature:*                    |         |                       |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                 |                                                                                                                                                  |         |                                                               |         |                       |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                             | City    | State                                                         | Country | Postal Code           |  |
| SECRETARY                                                                                                                                              | KAREN RUMPEL    | 1957 MONTGOMERY GULCH                                                                                                                            | KELLOGG | ID                                                            | USA     | 83837                 |  |
| PRESIDENT                                                                                                                                              | DONALD D RUMPEL | 1957 MONTGOMERY GULCH                                                                                                                            | KELLOGG | ID                                                            | USA     | 83737                 |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                |         |                                                               |         |                       |  |
| <b>ID<br/>C 84233</b>                                                                                                                                  |                 | Signature: Doris Miller                                                                                                                          |         |                                                               |         | Date: 05/04/2012      |  |
|                                                                                                                                                        |                 | Name (type or print): Doris Miller                                                                                                               |         |                                                               |         | Title: Office manager |  |
| Processed 05/04/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                        |         |                                                               |         |                       |  |