| No. <b>W 8541</b><br>Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><b>NO FILING FEE IF</b><br><b>RECEIVED BY DUE DATE</b> |                    | Due no later than Apr 30, 2011<br>Annual Report Form   | 2. Registered Agent and Address (NO PO BOX) KIRT GINNER 1408 E FALCONRIM CT EAGLE ID 83616 3. New Registered Agent Signature:* |              |         |             |  |
|---|--------------------|--|--|--------------|---------|-------------|--|
|   |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br>CORPORATE MIS, L.L.C.<br>KIRT T GINNER<br>1408 E FALCONRIM CT<br>EAGLE ID 83616 |  |              |         |             |  |
|   |                    |  |  |              |         |             |  |
| 4. Limited Liability Co   | ompanies: Enter Na | mes and Addresses of at least one Member or Manager.   |  |              |         |             |  |
| Office Held   | Name               | Street or PO Address   | City   | State        | Country | Postal Code |  |
| MEMBER  | KIRT GINNE         | R 45 S FIRWOOD AVE   | EAGLE  | ID           | USA     | 83616       |  |
| 5. Organized Under the Laws of:   |                    | 6. Annual Report must be signed.*  |  |              |         |             |  |
| ID  |                    | Signature: Shawna Ginner   | Date: 04/28/2011   |              |         |             |  |
| W 8541  |                    | Name (type or print): Shawna Ginner  |  | Title: Owner |         |             |  |
| Processed 04/28/2011       * Electronically provided signatures are accepted as original signatures.  |                    |  |  |              |         |             |  |