

|                                                                                                                                                        |                   |                                                                                                                                                                            |               |                                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 79238</b>                                                                                                                                     |                   | <b>Due no later than Nov 30, 2009</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>CAREYWOOD ON EAGLE'S WINGS, LLC<br>PATRICIA S MILLER<br>701 E FRONT AVE #602<br>COEUR D'ALENE ID 83814<br>USA |               | PATRICIA S MILLER<br>701 E FRONT AVE #602<br>COEUR D'ALENE ID 83814 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                            |               | 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                                                                                                                                                 | MARVIN G MILLER   | 701 E FRONT AVE. #602                                                                                                                                                      | COEUR D ALENE | ID                                                                  | USA     | 83814       |  |
| MEMBER                                                                                                                                                 | PATRICIA S MILLER | 701 E FRONT AVE. #602                                                                                                                                                      | COEUR D ALENE | ID                                                                  | USA     | 83814       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 79238</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Patricia S. Miller<br>Name (type or print): Patricia S. Miller                                                             |               |                                                                     |         |             |  |
| Date: 09/28/2009<br>Title: Owner                                                                                                                       |                   |                                                                                                                                                                            |               |                                                                     |         |             |  |
| Processed 09/28/2009                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                  |               |                                                                     |         |             |  |