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|--|---|---|---|-------|---------|-------------|
| No. <b>W 131029</b>  | <b>Due no later than Nov 30, 2014</b><br><b>Annual Report Form</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>NIELSON WYOMING, LLC<br>KIT QUERNA RANDALL DANSKIN<br>601 W RIVERSIDE AVE STE 1500<br>SPOKANE WA 99201 |   | JOANNE H NIELSEN<br>6915 E HENRY POINT RD<br>HAYDEN 83835 |       |         |             |
|  |   |   | 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  | JOANNE NIELSON  | 6915 E. HENRY POINT RD.   | HAYDEN  | ID    | USA     | 83835       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 131029</b>  | 6. Annual Report must be signed.*<br>Signature: JOANNE NIELSON<br>Name (type or print): JOANNE NIELSON  |   | Date: 10/17/2014<br>Title: MANAGER                        |       |         |             |
| Processed 10/17/2014   |   | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |