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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 98417</b>                                                                                                                                     |              | <b>Due no later than Dec 31, 2011</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>RMHS PROPERTIES, LLC<br>HELEN M FLINN<br>PO BOX 425<br>KIMBERLY ID 83341-0425<br>USA |          | HELEN FLINN<br>367 BIRCH ST S<br>KIMBERLY ID 83341 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                                   |          | 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                                                                                                                                                | PAUL S FLINN | 367 BIRCH ST SO P O BOX 425                                                                                                                       | KIMBERLY | ID                                                 | USA     | 83341-0425  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 98417</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Helen M. Flinn<br>Name (type or print): Helen M. Flinn<br>Date: 11/21/2011<br>Title: President    |          |                                                    |         |             |  |
| Processed 11/21/2011                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                         |          |                                                    |         |             |  |