

|  |                 |  |        |   |         |             |  |
|--|-----------------|--|--------|---|---------|-------------|--|
| No. <b>W 45545</b>   |                 | <b>Due no later than Dec 31, 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>KAJ, LLC<br>AARON S. JACKSON<br>PO BOX 56<br>JEROME ID 83338 |        | A SCOTT JACKSON<br>311 S ROSE ST<br>JEROME ID 83338 |         |             |  |
|  |                 |  |        | 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   | A SCOTT JACKSON | 311 S ROSE ST  | JEROME | ID  | USA     | 83338       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 45545</b>   |                 | 6. Annual Report must be signed.*<br>Signature: A. Scott Jackson<br>Name (type or print): A. Scott Jackson<br>Date: 01/02/2010<br>Title: Member                |        |   |         |             |  |
| Processed 01/02/2010   |                 | * Electronically provided signatures are accepted as original signatures.  |        |   |         |             |  |