

|                                                                                                                                                        |            |                                                                                                                                                     |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 62771</b>                                                                                                                                     |            | Due no later than May 31, 2009                                                                                                                      |       | 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>MIKE FIFER EXCAVATION LLC.<br>MIKE FIFER<br>31254 PITMAN LANE<br>PARMA ID 83660<br>USA |       | MIKE FIFER<br>31254 PITMAN LANE<br>PARMA ID 83660  |         |             |  |
|                                                                                                                                                        |            |                                                                                                                                                     |       | 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                                                                                                                                                | MIKE FIFER | 31254 PITMAN LANE                                                                                                                                   | PARMA | ID                                                 | USA     | 83660       |  |
| MANAGER                                                                                                                                                | MARY FIFER | 31254 PITMAN LANE                                                                                                                                   | PARMA | ID                                                 | USA     | 83660       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 62771</b>                                                                                           |            | 6. Annual Report must be signed.*<br>Signature: Mike Fifer<br>Name (type or print): Mike Fifer<br>Date: 06/17/2009<br>Title: Owner/Manager          |       |                                                    |         |             |  |
| Processed 06/17/2009                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                           |       |                                                    |         |             |  |