

|                                                                                                                                                        |                    |                                                                                                                                            |       |                                                              |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>W 51979</b>                                                                                                                                     |                    | <b>Due no later than Jun 30, 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>CEDAR DEVELOPMENT, LLC.<br>THOMAS J MARTIN<br>PO BOX 140658<br>BOISE ID 83714 |       | THOMAS J MARTIN<br>11075 HORSESHOE BEND RD<br>BOISE ID 83714 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                            |       | 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                                                                                                                                                | THOMAS J MARTIN    | PO BOX 140658                                                                                                                              | BOISE | ID                                                           | USA     | 83714       |  |
| MANAGER                                                                                                                                                | JAMIN T MARTIN     | PO BOX 140658                                                                                                                              | BOISE | ID                                                           | USA     | 83714       |  |
| MANAGER                                                                                                                                                | KATHERINE E MARTIN | PO BOX 140658                                                                                                                              | BOISE | ID                                                           | USA     | 83714       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 51979</b>                                                                                               |                    | 6. Annual Report must be signed.*<br>Signature: Jamin T Martin<br>Name (type or print): Jamin T Martin                                     |       |                                                              |         |             |  |
| Date: 05/06/2011<br>Title: Manager                                                                                                                     |                    |                                                                                                                                            |       |                                                              |         |             |  |
| Processed 05/06/2011                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                  |       |                                                              |         |             |  |