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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 85070</b>                                                                                                                                     |                   | <b>Due no later than Jun 30, 2012</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><br>PRECISE MRM LLC<br>501 E CLIFF RD<br>BURNSVILLE MN 55337                             |            | JEFF WARNER<br>1311 E FRANKLIN RD<br>STE 101-102<br>MERIDIAN ID 83642 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                       |            | 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                                                                                                                                                | STEVEN P LOEFFLER | 501 E CLIFF RD                                                                                                                                        | BURNSVILLE | MN                                                                    | USA     | 55337       |  |
| 5. Organized Under the Laws of:<br><br><b>MN<br/>W 85070</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Christine Norring<br>Name (type or print): Christine Norring<br>Date: 06/28/2012<br>Title: Controller |            |                                                                       |         |             |  |
| Processed 06/28/2012                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                             |            |                                                                       |         |             |  |