No. <b>C 175966</b> Return to:		o later than Nov 30, 2013 nual Report Form	THOMAS BU	2. Registered Agent and Address (NO PO BOX THOMAS BUCK			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		EAST	RICHFIELD II	1360 NORTH 1250 EAST RICHFIELD ID 83349  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and E	usiness Addresses of Pres	ident, Secretary, and Directors. Treas	urer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR THOMAS	RECTOR THOMAS E BUCK		RICHFIELD RICHFIELD BELLEVUE	ID ID ID	USA USA USA	83349 83349 83313	
5. Organized Under the Laws of: 6. Annual Report mus		st be signed.*					
ID Signature: Kris Nast		st	Da	Date: 10/21/2013			
C 175966 Name (type or prin		nt): Kris Nast	Ti	Title: Director			
Processed 10/21/2013	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					