

|                                                                                                                                                        |                |                                                                                                                                                                                             |          |                                                                  |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 3696</b>                                                                                                                                      |                | <b>Due no later than Mar 31, 2014</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>MODULAR COMMUNICATIONS L.L.C.<br>THOMAS S. SMITH<br>3714 S SOMMER RD<br>VERADALE WA 99037 |          | CORSER LLC, SCOTT BLGD<br>413 CEDAR ST.<br>WALLACE ID 83873-1852 |         |                  |  |
|                                                                                                                                                        |                |                                                                                                                                                                                             |          | 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                                                                                                                                                 | THOMAS S SMITH | 3714 S SOMMER RD                                                                                                                                                                            | VERADALE | WA                                                               | USA     | 99037            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                                                           |          |                                                                  |         |                  |  |
| <b>ID<br/>W 3696</b>                                                                                                                                   |                | Signature: Thomas S Smith                                                                                                                                                                   |          |                                                                  |         | Date: 02/10/2014 |  |
|                                                                                                                                                        |                | Name (type or print): Thomas S Smith                                                                                                                                                        |          |                                                                  |         | Title: Member    |  |
| Processed 02/10/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                                   |          |                                                                  |         |                  |  |