

|  |                      |  |  |  |             |                |                      |
|--|----------------------|--|--|--|-------------|----------------|----------------------|
| No. <b>W 16420</b>   |                      | <b>Due no later than Sep 30, 2011</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )     |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                      | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MR. MOWER III, LLC<br>KRIS KELLY<br>4500 YELLOWSTONE AVE<br>POCATELLO ID 83202<br>USA |  | KRIS KELLY<br>4500 YELLOWSTONE AVE<br>POCATELLO ID 83202 |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                      |  |  | 3. <u>New</u> Registered Agent Signature:*               |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                      |  |  |  |             |                |                      |
| Office Held<br>MEMBER  | Name<br>KRIS C KELLY | Street or PO Address<br>1675 FOXMORE ST.   |  | City<br>POCATELLO  | State<br>ID | Country<br>USA | Postal Code<br>83204 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 16420</b>                                 |                      | 6. Annual Report must be signed.*<br><br>Signature: Kris Kelly<br>Name (type or print): Kris Kelly<br><br>Date: 07/16/2011<br>Title: Member            |  |  |             |                |                      |
| Processed 07/16/2011 * Electronically provided signatures are accepted as original signatures.     |                      |  |  |  |             |                |                      |