No. <b>C 106823</b>		Due no later than Jun 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	1. Mail	Annual Report Form  1. Mailing Address: Correct in this box if needed.  THREE S, INC. SCOTT SEARLE P.O. BOX H SHELLEY ID 83274 USA		SCOTT SEARLE 959 E. 1400 N. SHELLEY ID 83274			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	THREE S SCOTT						
				3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names ar	nd Business Address	es of President, Secretary, and Directors. Trea	asurer (optional).				
Office Held Name	е	Street or PO Address	City	State	Country	Postal Code	
SECRETARY BRYA	N SEARLE	P.O. BOX H	SHELLEY	ID	USA	83274	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
<b>ID</b> Signature: Scott Searle		e: Scott Searle		Date: 04/24/2013			
C 106823	Name (t	Name (type or print): Scott Searle		Title: Member			
Processed 04/24/2013	* Electronic	* Electronically provided signatures are accepted as original signatures.					