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|--|---------------------|--|-------------|--|---------|-------------|--|
| No. W 66080 | | Due no later than Aug 31, 2008 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. AUSTIN KADE ACADEMY, LLC BRIAN K CORNELISON 1646 S WOODRUFF IDAHO FALLS ID 83404 | | BRIAN K CORNELISON 2400 E 25TH ST IDAHO FALLS ID 83404 | | | |
| | | | | 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 | BRIAN K CORNELISON | 2400 E 25TH ST | IDAHO FALLS | ID | USA | 83404 | |
| MANAGER | BRANDI B CORNELISON | 2400 E 25TH ST | IDAHO FALLS | ID | USA | 83404 | |
| MANAGER | TYLER M PRICE | 2355 1ST ST | IDAHO FALLS | ID | USA | 83401 | |
| MANAGER | ALLISON D PRICE | 2355 1ST ST | IDAHO FALLS | ID | USA | 83401 | |
| 5. Organized Under the Laws of: ID W 66080 | | 6. Annual Report must be signed.* Signature: Brian K. Cornelison Name (type or print): Brian K. Cornelison Date: 06/16/2008 Title: Manager | | | | | |
| Processed 06/16/2008 | | * Electronically provided signatures are accepted as original signatures. | | | | | |