

|                                                                                                                                                        |                     |                                                                                                                                                                  |        |                                                                 |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------|---------|-------------|--|
| No. <b>W 107269</b>                                                                                                                                    |                     | <b>Due no later than Oct 31, 2013</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>1. Mailing Address: Correct in this box if needed.</b><br>WILLOW VALLEY TRADES, LLC<br>JACOB U CHRISTENSEN<br>8132 N STONE HAVEN DR<br>HAYDEN ID 83835<br>USA |        | JACOB U CHRISTENSEN<br>8132 N STONE HAVEN DR<br>HAYDEN ID 83835 |         |             |  |
|                                                                                                                                                        |                     |                                                                                                                                                                  |        | 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                                                                                                                                                 | JACOB U CHRISTENSEN | 8132 NORTH STONE HAVEN DR.                                                                                                                                       | HAYDEN | ID                                                              | USA     | 83835       |  |
| 5. Organized Under the Laws of:<br><b>UT<br/>W 107269</b>                                                                                              |                     | 6. Annual Report must be signed.*<br>Signature: Jacob Christensen<br>Name (type or print): Jacob Christensen<br>Date: 08/12/2013<br>Title: Owner                 |        |                                                                 |         |             |  |
| Processed 08/12/2013                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                        |        |                                                                 |         |             |  |