

|  |                |  |        |  |         |                  |  |
|--|----------------|--|--------|--|---------|------------------|--|
| No. <b>W 54488</b>   |                | <b>Due no later than Sep 30, 2010</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><br>3049 ZANE LLC<br>THOMAS C HEISE<br>PO BOX 1475<br>HAYDEN ID 83835 |        | STEPHEN M AYERS<br>1424 SHERMAN AVE #100<br>COEUR D'ALENE ID 83814 |         |                  |  |
|  |                |  |        | 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  | THOMAS C HEISE | HEISE FAMILY TRUST   | HAYDEN | ID   | USA     | 83835            |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |        |  |         |                  |  |
| <b>ID<br/>W 54488</b>  |                | Signature: Thomas C Heise  |        |  |         | Date: 10/26/2010 |  |
|  |                | Name (type or print): Thomas C Heise   |        |  |         | Title: Manager   |  |
| Processed 10/26/2010   |                | * Electronically provided signatures are accepted as original signatures.  |        |  |         |                  |  |