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|--|-------------------------|---|-------|--|---------|-------------|--|
| No. W 109620 | | Due no later than Dec 31, 2013 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. DREAM LIVIN, LLC. BRENT L. SMITH PO BOX 600 RIGBY ID 83442 USA | | PATRICIA A SWAIN 4110 E 300 N RIGBY ID 83442 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 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 | BRENT L. SMITH | P.O. BOX 535 | RIGBY | ID | USA | 83442 | |
| MANAGER | PATRICIA SWAIN A. SWAIN | P.O. BOX 600 | RIGBY | ID | USA | 83442 | |
| 5. Organized Under the Laws of: ID W 109620 | | 6. Annual Report must be signed.* Signature: Brent L. Smith Name (type or print): Brent L. Smith | | | | | |
| | | Date: 11/11/2013 Title: Manager | | | | | |
| Processed 11/11/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |