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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 16293</b>                                                                                                                                     |                 | <b>Due no later than Aug 31, 2011</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>CHOKECHERRY PICKINS' LIMITED COMPANY<br>ANNA MANWARING<br>2031 DUCHESS CT<br>IDAHO FALLS ID 83401 |             | KIPP MANWARING<br>490 N MAPLE ST<br>BLACKFOOT ID 83221 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                    |             | 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                                                                                                                                                | ANNA MANWARING  | 2031 DUCHESS CT                                                                                                                                                    | IDAHO FALLS | ID                                                     | USA     | 83401       |  |
| MEMBER                                                                                                                                                 | GREGG MANWARING | 2031 DUCHESS CT                                                                                                                                                    | IDAHO FALLS | ID                                                     | USA     | 83401       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 16293</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Anna Manwaring<br>Name (type or print): Anna Manwaring                                                             |             |                                                        |         |             |  |
|                                                                                                                                                        |                 | Date: 06/29/2011<br>Title: Manager                                                                                                                                 |             |                                                        |         |             |  |
| Processed 06/29/2011                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                          |             |                                                        |         |             |  |