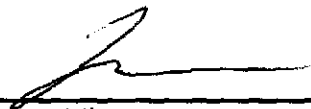


No. W 129232	Due no later than Sep 30, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DAVID SIMPSON 36 E BOOTH ST LAVA HOT SPRINGS ID 83246
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SIMPSON AVIATION LLC DAVID SIMPSON PO BOX 685 LAVA HOT SPRINGS ID 83246		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DAVID SIMPSON	36 E BOOTH ST	LAVA HOT SPRINGS, ID USA 83246
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 129232 </div>		6. Signature:  <hr/> Name (type or print): <u>DAVID SIMPSON</u> <div style="float: right; text-align: right;"> Date: <u>AUG 06 2014</u> Title: <u>MANAGER</u> </div>	
Issued 07/22/2014 by JL1		112310	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the