

|                                                                                                                                                        |                      |                                                                                                                                                        |          |                                                               |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------|---------|------------------|--|
| No. <b>C 120709</b>                                                                                                                                    |                      | <b>Due no later than Aug 31, 2014</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>KINGSLEY MARKETING, INC.<br>MICHAEL KINGSLEY<br>3413 BLUEBIRD CIRCLE<br>LEWISTON ID 83501 |          | MICHAEL KINGSLEY<br>3413 BLUEBIRD CIRCLE<br>LEWISTON ID 83501 |         |                  |  |
|                                                                                                                                                        |                      |                                                                                                                                                        |          | 3. <u>New</u> Registered Agent Signature:*                    |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                      |                                                                                                                                                        |          |                                                               |         |                  |  |
| Office Held                                                                                                                                            | Name                 | Street or PO Address                                                                                                                                   | City     | State                                                         | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | MICHAEL LEE KINGSLEY | 3413 BLUEBIRD CIRCLE                                                                                                                                   | LEWISTON | ID                                                            | USA     | 83501            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                      | 6. Annual Report must be signed.*                                                                                                                      |          |                                                               |         |                  |  |
| <b>ID<br/>C 120709</b>                                                                                                                                 |                      | Signature: Carolyn Kingsley                                                                                                                            |          |                                                               |         | Date: 09/22/2014 |  |
|                                                                                                                                                        |                      | Name (type or print): Carolyn Kingsley                                                                                                                 |          |                                                               |         | Title: Secretary |  |
| Processed 09/22/2014                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                              |          |                                                               |         |                  |  |