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|--|------------------|---|-------|---|---------|-------------|--|
| No. C 152522 | | Due no later than Jan 31, 2012 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. KNIPE CORP. AMANDA L KNIPE 2773 S ARMADA PLACE BOISE ID 83706 | | BRADFORD T KNIPE 2773 S ARMADA PLACE BOISE ID 83706 | | | |
| | | | | 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 | |
| SECRETARY | AMANDA L KNIPE | 2773 S. ARMADA PLACE | BOISE | ID | USA | 83706 | |
| PRESIDENT | BRADFORD T KNIPE | 2773 S. ARMADA PLACE | BOISE | ID | USA | 83706 | |
| 5. Organized Under the Laws of: ID C 152522 | | 6. Annual Report must be signed.* Signature: Amanda L Knipe Name (type or print): Amanda L Knipe | | | | | |
| | | Date: 11/08/2011 Title: Secretary | | | | | |
| Processed 11/08/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | | |