No. <b>W 44035</b>		D	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		to account to bound become our or	CLINT SCHNOOR 1901 TAMARACK LOOP TWIN FALLS ID 83301			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  MAGELLAN CAPITAL MANAGEMENT LLC CLINT SCHNOOR 1901 TAMARACK LOOP TWIN FALLS ID 83301		No. CONTROL AND ADDRESS OF THE PARTY OF THE				
				3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	anies: Enter Nai	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER			1901 TAMARACK LOOP 2756 CARRIAGE WAY	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 44035		Signature: Clint Schnoor			Date: 08/14/2013			
		Name (type or print): Clint Schnoor			Title: Member			
Processed 08/14/2013 * Electronically provided signatures are accepted as original signatures.								