

|  |                |  |       |   |         |             |  |
|--|----------------|--|-------|---|---------|-------------|--|
| No. <b>W 104186</b>  |                | <b>Due no later than Jun 30, 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>COLE CONSULTING LLC<br>SUSAN G COLE<br>12966 N TOWN RIDGE ROAD<br>BOISE ID 83714<br>USA |       | SUSAN COLE<br>12966 N TOWN RIDGE ROAD<br>BOISE ID 83714 |         |             |  |
|  |                |  |       | 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 |  |
| MEMBER   | DOUGLAS W COLE | 12966 N TOWN RIDGE RD  | BOISE | ID  | USA     | 83714       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 104186</b>  |                | 6. Annual Report must be signed.*<br>Signature: Susan Cole<br>Name (type or print): Susan Cole   |       |   |         |             |  |
|  |                | Date: 07/09/2014<br>Title: Partner   |       |   |         |             |  |
| Processed 07/09/2014   |                | * Electronically provided signatures are accepted as original signatures.  |       |   |         |             |  |