

|  |           |   |                |  |                     |
|--|-----------|---|----------------|--|---------------------|
| No. <b>W 29287</b>   |           | <b>Due no later than Mar 31, 2013</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>2-W CUSTOM, LLC<br>JEFF WYNN<br>PO BOX 202<br>AMERICAN FALLS ID 83211 |                | JEFF WYNN<br>460 FILLMORE<br>AMERICAN FALLS ID 83211 |                     |
|  |           |   |                | 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   | JEFF WYNN | PO BOX 202  | AMERICAN FALLS | ID   | USA 83211           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 29287</b>   |           | 6. Annual Report must be signed.*<br>Signature: Jeffery H Wynn<br>Name (type or print): Jeffery H Wynn<br>Date: 03/28/2013<br>Title: Member                             |                |  |                     |
| Processed 03/28/2013   |           | * Electronically provided signatures are accepted as original signatures.   |                |  |                     |