

|                                                                                                                                                        |                |                                                                                                                                                                          |        |                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------|---------|-------------|--|
| No. <b>W 36647</b>                                                                                                                                     |                | <b>Due no later than Feb 29, 2012</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>CEDAR CHEST L.L.C.<br>KERRIE L SCOTT<br>PO BOX 3028<br>HAYDEN ID 83835 |        | PAUL G SCOTT<br>4956 E HUDLOW RD<br>HAYDEN ID 83835 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                          |        | 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 |  |
| MANAGER                                                                                                                                                | KERRIE L SCOTT | PO BOX 3028                                                                                                                                                              | HAYDEN | ID                                                  | USA     | 83835       |  |
| MANAGER                                                                                                                                                | PAUL G SCOTT   | PO BOX 3028                                                                                                                                                              | HAYDEN | ID                                                  | USA     | 83835       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 36647</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Kerrie Scott<br>Name (type or print): Kerrie Scott<br>Date: 12/19/2011<br>Title: Co-Owner/Co-Manager                     |        |                                                     |         |             |  |
| Processed 12/19/2011                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                |        |                                                     |         |             |  |