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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------|---------------------|
| No. <b>W 81149</b>                                                                                                                                     |                      | <b>Due no later than Feb 28, 2015</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>COST AND CAPITAL PARTNERS, L.L.C.<br>TOM BOKOWY<br>524 S LINCOLN AVE<br>SANDPOINT ID 83864 |           | TOM BOKOWY<br>524 S LINCOLN AVE<br>SANDPOINT 83864 |                     |
|                                                                                                                                                        |                      |                                                                                                                                                                                              |           | 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                                                                                                                                                | THOMAS EDWARD BOKOWY | 524 S LINCOLN AVE                                                                                                                                                                            | SANDPOINT | ID                                                 | USA 83864           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 81149</b>                                                                                           |                      | 6. Annual Report must be signed.*<br>Signature: Thomas E Bokowy<br>Name (type or print): Thomas E Bokowy<br>Date: 01/04/2015<br>Title: Senior Partner                                        |           |                                                    |                     |
| Processed 01/04/2015                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                                                    |           |                                                    |                     |