

|  |            |  |          |  |         |                  |  |
|--|------------|--|----------|--|---------|------------------|--|
| No. <b>W 48136</b>   |            | <b>Due no later than Mar 31, 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>MADA LLC<br>ADAM KEITH<br>3715 NORTH MORNING SKY PL<br>MERIDIAN ID 83642 |          | ADAM KEITH<br>3715 NORTH MORNING SKY PL<br>MERIDIAN ID 83642 |         |                  |  |
|  |            |  |          | 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   | ADAM KEITH | 3715 NORTH MORNING SKY PL  | MERIDIAN | ID   | USA     | 83642            |  |
| 5. Organized Under the Laws of:  |            | 6. Annual Report must be signed.*  |          |  |         |                  |  |
| <b>ID<br/>W 48136</b>  |            | Signature: Adam Keith  |          |  |         | Date: 02/15/2012 |  |
|  |            | Name (type or print): Adam Keith   |          |  |         | Title: Member    |  |
| Processed 02/15/2012   |            | * Electronically provided signatures are accepted as original signatures.  |          |  |         |                  |  |