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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------|---------|-------------------------|--|
| No. <b>W 117933</b>                                                                                                                                    |                       | <b>Due no later than Oct 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>1. Mailing Address: Correct in this box if needed.</b><br>GILMARTIN PROPERTY, LLC<br>JAMES F TOPLIFF<br>818 W RIVERSIDE AVE SUITE 250<br>SPOKANE WA 99201<br>USA |        | JAMES F TOPLIFF<br>1424 E SHERMAN AVE #300<br>COEUR D ALENE ID 83814 |         |                         |  |
|                                                                                                                                                        |                       |                                                                                                                                                                     |        | 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                                                                                                                                                | EARL J. GILMARTIN III | 357 W. 200 NORTH                                                                                                                                                    | JEROME | ID                                                                   | USA     | 83338                   |  |
| 5. Organized Under the Laws of:                                                                                                                        |                       | 6. Annual Report must be signed.*                                                                                                                                   |        |                                                                      |         |                         |  |
| <b>ID<br/>W 117933</b>                                                                                                                                 |                       | Signature: James F. Topliff                                                                                                                                         |        |                                                                      |         | Date: 08/22/2013        |  |
|                                                                                                                                                        |                       | Name (type or print): James F. Topliff                                                                                                                              |        |                                                                      |         | Title: Registered Agent |  |
| Processed 08/22/2013                                                                                                                                   |                       | * Electronically provided signatures are accepted as original signatures.                                                                                           |        |                                                                      |         |                         |  |