

No. W 29680	Due no later than Apr 30, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) W LYNN HOPKINS 2529 EAST 1000 NORTH TETON ID 83451																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SANDRACO, LLC WILLIAM L. HOPKINS 2529 EAST 100 NORTH TETON ID 83451 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>W Lynn Hopkins</td> <td>2529 E 1000 N</td> <td>Teton</td> <td>Idaho</td> <td>USA</td> <td>83451</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Sandra Hopkins</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	W Lynn Hopkins	2529 E 1000 N	Teton	Idaho	USA	83451	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Sandra Hopkins	"	"	"	"	"	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 29680 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u>W Lynn Hopkins</u> </td> <td style="width: 40%;"> Date: <u>2-19-2013</u> </td> </tr> <tr> <td> Name (type or print): <u>W Lynn Hopkins</u> </td> <td> Title: <u>Member</u> </td> </tr> </table>		Signature: <u>W Lynn Hopkins</u>	Date: <u>2-19-2013</u>	Name (type or print): <u>W Lynn Hopkins</u>	Title: <u>Member</u>																															
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