

|  |                    |  |           |  |         |                  |  |
|--|--------------------|--|-----------|--|---------|------------------|--|
| No. <b>W 49864</b>   |                    | <b>Due no later than Apr 30, 2007</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><br>TRIPLEPLAY4IDAHO, LLC<br>HEATHER ECHEVARRIA<br>PO BOX 140272<br>BOISE ID 83714-0272 |           | HEATHER ECHEVARRIA<br>1159 E IRON EAGLE DR STE 170<br>EAGLE ID 83616 |         |                  |  |
|  |                    |  |           | 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  | HEATHER ECHEVARRIA | PO BOX 140272  | BOISE     | ID   | USA     | 83714-0272       |  |
| MANAGER  | BEN ECHEVARRIA     | PO BOX 140272  | BOISE     | ID   | USA     | 83714-0272       |  |
| MANAGER  | RICH SEILER        | 19808 SE 8TH ST  | SAMMAMISH | WA   | USA     | 98074-3804       |  |
| MANAGER  | MIKE FELL          | PO BOX 149   | HOMER     | AK   | USA     | 99603-0272       |  |
| 5. Organized Under the Laws of:  |                    | 6. Annual Report must be signed.*  |           |  |         |                  |  |
| <b>ID<br/>W 49864</b>  |                    | Signature: Heather Echevarria  |           |  |         | Date: 06/03/2007 |  |
|  |                    | Name (type or print): Heather Echevarria   |           |  |         | Title: Manager   |  |
| Processed 06/03/2007   |                    | * Electronically provided signatures are accepted as original signatures.  |           |  |         |                  |  |