

|  |                 |   |            |   |         |                  |  |
|--|-----------------|---|------------|---|---------|------------------|--|
| No. <b>W 45162</b>   |                 | <b>Due no later than Dec 31, 2014</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>REINLAND PROPERTIES, L.L.C.<br>KUNYA M REINLAND<br>PO BOX 2545<br>POST FALLS ID 83877<br>USA |            | JAMES F TOPLIFF<br>1424 E SHERMAN AVE #300<br>COEUR D'ALENE 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  | THOMAS REINLAND | PO BOX 2545   | POST FALLS | ID  |         | 83877            |  |
| MANAGER  | KUNYA REINLAND  | PO BOX 2545   | POST FALLS | ID  | USA     | 83877            |  |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |            |   |         |                  |  |
| <b>ID<br/>W 45162</b>  |                 | Signature: Kunya Reinland   |            |   |         | Date: 01/13/2015 |  |
|  |                 | Name (type or print): Kunya Reinland  |            |   |         | Title: Owner     |  |
| Processed 01/13/2015   |                 | * Electronically provided signatures are accepted as original signatures.   |            |   |         |                  |  |