

|                                                                                                                                                        |        |                                                                                                                                                        |       |                                                       |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|------------------|--|
| No. <b>W 88325</b>                                                                                                                                     |        | <b>Due no later than Nov 30, 2011</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>GERRY'S METAL DETECTORS, LLC<br>GERALD W MCMULLEN<br>1101 N 15TH ST<br>BOISE ID 83702 |       | GERALD W MCMULLEN<br>1101 N 15TH ST<br>BOISE ID 83702 |         |                  |  |
|                                                                                                                                                        |        |                                                                                                                                                        |       | 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                                                                                                                                                 | YES ME | SAME                                                                                                                                                   | BOISE | ID                                                    | USA     | 83702            |  |
| 5. Organized Under the Laws of:                                                                                                                        |        | 6. Annual Report must be signed.*                                                                                                                      |       |                                                       |         |                  |  |
| <b>ID<br/>W 88325</b>                                                                                                                                  |        | Signature: Gerry McMullen                                                                                                                              |       |                                                       |         | Date: 11/18/2011 |  |
|                                                                                                                                                        |        | Name (type or print): Gerry McMullen                                                                                                                   |       |                                                       |         | Title: Mr        |  |
| Processed 11/18/2011                                                                                                                                   |        | * Electronically provided signatures are accepted as original signatures.                                                                              |       |                                                       |         |                  |  |