

|                                                                                                                                                        |                    |                                                                                                                                                               |         |                                                                                   |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------------------------------|---------|-------------|--|
| No. <b>C 110442</b>                                                                                                                                    |                    | <b>Due no later than May 31, 2011</b>                                                                                                                         |         | <b>2. Registered Agent and Address (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>BOB'S AIRMOTIVE, INCORPORATED<br>KATHLEEN J PLUMMER<br>PO BOX 404<br>CHALLIS ID 83226<br>USA |         | KATHLEEN J PLUMMER<br>CHALLIS MUNICIPAL AIRPORT<br>HIGHWAY 93<br>CHALLIS ID 83226 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                               |         | 3. <u>New</u> Registered Agent Signature:*                                        |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                    |                                                                                                                                                               |         |                                                                                   |         |             |  |
| Office Held                                                                                                                                            | Name               | Street or PO Address                                                                                                                                          | City    | State                                                                             | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | BRETT A PLUMMER    | PO BOX B                                                                                                                                                      | CHALLIS | ID                                                                                | USA     | 83226       |  |
| SECRETARY                                                                                                                                              | KATHLEEN J PLUMMER | PO BOX 525                                                                                                                                                    | CHALLIS | ID                                                                                | USA     | 83226       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 110442</b>                                                                                          |                    | 6. Annual Report must be signed.*<br>Signature: Kathleen J Plummer<br>Name (type or print): Kathleen J Plummer<br>Date: 03/17/2011<br>Title: Secretary        |         |                                                                                   |         |             |  |
| Processed 03/17/2011                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                     |         |                                                                                   |         |             |  |