| No. <b>W 57596</b>   |                | Due no later than Dec 31, 2009                                     |                                      | 2. Registered                | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|----------------|--|--------------------------------------|------------------------------|---|---------|-------------|--|
| Return to:   |                | Annual Report Form   |                                      | N 200 AV 20 AV 200 AV 200 AV | RALPH R TOWLE                               |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |                | 1. Mailing Address: Correct in this box if needed.                 |                                      |                              | 1014 LAPOINTE<br>BOISE ID 83706             |         |             |  |
|  |                | DESIGN RESOURCES, PLLC LESLIE SPENCER 1014 LAPOINTE BOISE ID 83706 |                                      | BOISE ID                     | BOISE ID 83/06                              |         |             |  |
|  |                |  |                                      | 3. <u>New</u> Registe        | 3. New Registered Agent Signature:*         |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                | USA  |                                      |                              |   |         |             |  |
| 4. Limited Liability Compa   | nies: Enter Na | mes and Addresses  | s of at least one Member or Manager. |                              |   |         |             |  |
| Office Held  | Name           |  | Street or PO Address                 | City                         | State                                       | Country | Postal Code |  |
| MEMBER THOMAS J<br>MEMBER RALPH R TO   |                |  | 1014 LAPOINTE                        | BOISE                        | ID  | USA     | 83706       |  |
|  |                | OWLE   | 1014 LAPOINTE                        | BOISE                        | ID  | USA     | 83706       |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*                                  |                                      |                              |   |         |             |  |
| ID<br>W 57596  |                | Signature: Leslie Spencer  |                                      | D                            | Date: 11/10/2009                            |         |             |  |
|  |                | Name (type or print): Leslie Spencer                               |                                      | Т                            | Title: Office Manager                       |         |             |  |
| Processed 11/10/2009 * Electronically provided signatures are accepted as original signatures. |                |  |                                      |                              |   |         |             |  |