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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------|---------|-------------|--|
| No. <b>W 66201</b>                                                                                                                                     |                    | <b>Due no later than Aug 31, 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>NORTHWEST EXPRESSIONS LLC<br>BILL CAMPBELL<br>10498 W BENNION RD<br>WORLEY ID 83876<br>USA |        | F WILLIAM CAMPBELL<br>10498 W BENNION RD<br>WORLEY ID 83876 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                             |        | 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                                                                                                                                                | F WILLIAM CAMPBELL | 10498 W BENNION RD                                                                                                                                          | WORLEY | ID                                                          | USA     | 83876       |  |
| MEMBER                                                                                                                                                 | PAM CAMPBELL       | 10498 W BENNION ROAD                                                                                                                                        | WORLEY | ID                                                          | USA     | 83876       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 66201</b>                                                                                           |                    | 6. Annual Report must be signed.*<br>Signature: Bill Campbell<br>Name (type or print): Bill Campbell                                                        |        |                                                             |         |             |  |
|                                                                                                                                                        |                    | Date: 06/21/2011<br>Title: Manager                                                                                                                          |        |                                                             |         |             |  |
| Processed 06/21/2011                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                   |        |                                                             |         |             |  |