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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------|------------------|-------------|--|
| No. <b>W 72995</b>                                                                                                                                     |                | <b>Due no later than Apr 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>Annual Report Form</b>                                                                                                                                 |          | MATT PECK<br>19 SOUTH STATE<br>PRESTON ID 83263    |                  |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b><br>CIRCLE 2 CONSTRUCTION & DEVELOPMENT, LLC<br>TRAVIS M KUNZ<br>1942 N MAIN<br>N LOGAN UT 84341 |          | 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                                                                                                                                                 | MATTHEW S PECK | 440 N 1600 W                                                                                                                                              | LEWISTON | UT                                                 | USA              | 84320       |  |
| MEMBER                                                                                                                                                 | KRISTI J PECK  | 440 N 1600 W                                                                                                                                              | LEWISTON | UT                                                 | USA              | 84320       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                         |          |                                                    |                  |             |  |
| <b>ID<br/>W 72995</b>                                                                                                                                  |                | Signature: Travis M Kunz                                                                                                                                  |          |                                                    | Date: 02/07/2011 |             |  |
|                                                                                                                                                        |                | Name (type or print): Travis M Kunz                                                                                                                       |          |                                                    | Title: Cpa, Cfe  |             |  |
| Processed 02/07/2011                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                 |          |                                                    |                  |             |  |