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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------|---------|-------------|--|
| No. <b>W 5351</b>                                                                                                                                      |                 | <b>Due no later than Jan 31, 2014</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>WILSON WOODYARD, L.L.C.<br>DAVID F. WILSON<br>PO BOX 6770<br>KETCHUM ID 83340 |         | DAVID F. WILSON<br>251 NORTHWOOD WAY STE F<br>KETCHUM ID 83340 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                |         | 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                                                                                                                                                 | DAVID F. WILSON | PO BOX 3214                                                                                                                                    | KETCHUM | ID                                                             | USA     | 83340       |  |
| MEMBER                                                                                                                                                 | SUE WOODYARD    | 251 NORTHWOOD WAY STE F                                                                                                                        | KETCHUM | ID                                                             | USA     | 83340       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 5351</b>                                                                                            |                 | 6. Annual Report must be signed.*<br>Signature: DF Wilson<br>Name (type or print): DF Wilson<br>Date: 11/22/2013<br>Title: Member              |         |                                                                |         |             |  |
| Processed 11/22/2013                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                      |         |                                                                |         |             |  |