| No. <b>C 189383</b>   |                                       | Due no later than Dec 31, 2013 Annual Report Form  |                                    | 2. Registered A      | Registered Agent and Address (NO PO BOX)     DOUGLAS I MCINTOSH    |            |                |  |
|---|---------------------------------------|--|------------------------------------|----------------------|--|------------|----------------|--|
| Return to:  |                                       |  |                                    |                      |  |            |                |  |
| 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.  MAC2, INC.  DOUGLAS I MCINTOSH 2505 GRELLE LEWISTON ID 83501 |                                    | LEWISTON I           | 2505 GRELLE LEWISTON ID 83501  3. New Registered Agent Signature:* |            |                |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE  |                                       |  |                                    |                      | 3  |            |                |  |
| 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    |  |
| DIRECTOR<br>SECRETARY   | DAVID K MCINTOSH<br>BRENDA K MCINTOSH |  | 2505 GRELLE AVE<br>2505 GRELLE AVE | LEWISTON<br>LEWISTON | ID<br>ID   | USA<br>USA | 83501<br>83501 |  |
| PRESIDENT   | DOUGLAS I MCINTOSH                    |  | 2505 GRELLE AVE<br>2505 GRELLE AVE | LEWISTON             | ID   | USA        | 83501          |  |
| 5. Organized Under the Laws of:   |                                       | 6. Annual Report   | must be signed.*                   |                      |  |            |                |  |
| ID<br>C 189383  |                                       | Signature: Do  |                                    | Date: 10/21/2013     |  |            |                |  |
|   |                                       | Name (type or  |                                    | Title: President     |  |            |                |  |
| Processed 10/21/2013 * Electronically provided signatures are accepted as original signatures.                    |                                       |  |                                    |                      |  |            |                |  |