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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 6677</b>                                                                                                                                      |                                         | Due no later than Aug 31, 2014                                                                                                              |          | 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>BROCKE PROPERTIES, LLC<br>DEAN H BROCKE<br>PO BOX 159<br>KENDRICK ID 83537 |          | DEAN H BROCKE<br>901 WEST HIGHWAY 3<br>KENDRICK ID 83537 |         |             |  |
|                                                                                                                                                        |                                         |                                                                                                                                             |          | 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                                                                                                                                                 | GEORGE F BROCKE & SONS,<br>INCORPORATED | PO BOX 159                                                                                                                                  | KENDRICK | ID                                                       | USA     | 83537       |  |
| MEMBER                                                                                                                                                 | BERT BROCKE                             | 901 WEST HIGHWAY 3                                                                                                                          | KENDRICK | ID                                                       | USA     | 83537       |  |
| MEMBER                                                                                                                                                 | MIKE BROCKE                             | 901 WEST HIGHWAY 3                                                                                                                          | KENDRICK | ID                                                       | USA     | 83537       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 6677</b>                                                                                            |                                         | 6. Annual Report must be signed.*<br>Signature: Dean Brocke<br>Name (type or print): Dean Brocke                                            |          |                                                          |         |             |  |
|                                                                                                                                                        |                                         | Date: 09/17/2014<br>Title: Managing member                                                                                                  |          |                                                          |         |             |  |
| Processed 09/17/2014                                                                                                                                   |                                         | * Electronically provided signatures are accepted as original signatures.                                                                   |          |                                                          |         |             |  |