

|                                                                                                                                                        |                 |                                                                                                                                                               |       |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 50486</b>                                                                                                                                     |                 | <b>Due no later than May 31, 2008</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>NELSON'S PROPERTY MANAGEMENT L.L.C.<br>STACY R NELSON<br>4413 S VARIAN AVE<br>BOISE ID 83709 |       | STACY R NELSON<br>4413 S VARIAN AVE<br>BOISE ID 83709 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                               |       | 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                                                                                                                                                 | STACY R NELSON  | 4413 S VARIAN AVE                                                                                                                                             | BOISE | ID                                                    | USA     | 83709       |  |
| MEMBER                                                                                                                                                 | SHAUNA N NELSON | 4413 S VARIAN AVE                                                                                                                                             | BOISE | ID                                                    | USA     | 83709       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 50486</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Stacy Nelson<br>Name (type or print): Stacy Nelson                                                            |       |                                                       |         |             |  |
| Date: 03/25/2008<br>Title: Member                                                                                                                      |                 |                                                                                                                                                               |       |                                                       |         |             |  |
| Processed 03/25/2008                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                     |       |                                                       |         |             |  |