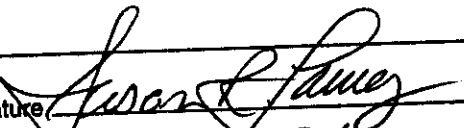


No. W 1777	Due no later than December 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX SUSAN LAWRENZ 101 GRACE HAILEY, ID 83333																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MOUNT BENNETT LLC DONALD R LAWRENZ JR PO BOX 4289 HAILEY, ID 83333	3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>DONALD R. LAWRENZ</td> <td>101 GRACE</td> <td>HAILEY</td> <td>ID</td> <td>83333</td> </tr> <tr> <td>MANAGER</td> <td>SUSAN R. LAWRENZ</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	DONALD R. LAWRENZ	101 GRACE	HAILEY	ID	83333	MANAGER	SUSAN R. LAWRENZ	" "	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>															
MANAGER	DONALD R. LAWRENZ	101 GRACE	HAILEY	ID	83333															
MANAGER	SUSAN R. LAWRENZ	" "	"	"	"															
5. Organized Under the Laws of: IDAHO W 1777	6. <div style="display: flex; justify-content: space-between;"> <div> Signature  Name (Type or Print) <u>SUSAN R. LAWRENZ</u> </div> <div> Date <u>10/26/08</u> Title <u>MANAGER</u> </div> </div>																			