| No. W 39940 | | Due no later than Jun 30, 2009 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|---|--|------------------------|--|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. COLLINS ADVENTURES LLC SASHA D COLLINS 1770 W STATE ST BOX 344 BOISE ID 83702 | | 1119 N 16T BOISE ID | SASHA D COLLINS 1119 N 16TH ST BOISE ID 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar | | | | o. <u>New</u> Region | ered Agene 3 | gracure. | | |
| Office Held | Name | nes and Addresse | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER MANAGER | IAGER SASHA D OBERLE | | 1770 W STATE ST BOX 344 1770 W STATE ST BOX 344 | BOISE BOISE | ID ID | USA USA | 83702 83702 | |
| 5. Organized Under the Laws of: | | 6. Annual Repor | | | | | | |
| ID W 39940 | | Signature: Thomas Collins | | | Date: 04/20/2009 | | | |
| | | Name (type o | | Title: Member | | | | |
| Processed 04/20/2009 | rocessed 04/20/2009 * Electronically provided signatures are accepted as original signatures. | | | | | | | |