| No. **W 59293** | **Due no later than Feb 28, 2010**<br>**Annual Report Form** | 2. Registered Agent and Address **(NO PO BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>**NO FILING FEE IF RECEIVED BY DUE DATE** | **1. Mailing Address: Correct in this box if needed.**<br>SYRINGA SERVICES, LLC<br>LORI JO POOLE<br>7615 W MCMULLEN ST<br>BOISE ID 83709-0836 | LORI JO POOLE<br>7615 W MCMULLEN ST<br>BOISE ID 83709<br><br>3. New 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 |
|---|---|---|---|---|---|---|
| MANAGER | LORI JO POOLE | 7615 W MCMULLEN ST | BOISE | ID | USA | 83709-0836 |

| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
|---|---|---|
| **ID**<br>**W 59293** | Signature: Lori Jo Poole | Date: 12/15/2009 |
| | Name (type or print): Lori Jo Poole | Title: Manager |

Processed 12/15/2009

* Electronically provided signatures are accepted as original signatures.