No. **W 13933**	**Due no later than Dec 31, 2009**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** SEE R SERVICES, LLC SUSAN M SPENCER PO BOX 1415 OROFINO ID 83544 USA	ALVIN D SPENCER 2362 GRANGEMONT RD OROFINO ID 83544 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
MEMBER	ALVIN D SPENCER	PO BOX 1415	OROFINO	ID	USA	83544

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 13933**	Signature: Susan Spencer	Date: 12/31/2009
	Name (type or print): Susan Spencer	Title: Bookkeeper

Processed 12/31/2009

* Electronically provided signatures are accepted as original signatures.