

No. <b>W 88662</b>		<b>Due no later than Dec 31, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  CUSTOM RX, LLC TRAVIS L. WALTHALL P.O BOX 246 173 W. 4TH STREET KUNA ID 83634 USA		MIKE HALL 660 E FRANKLIN RD STE 220 MERIDIAN ID 83642			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name TRAVIS L WALTHALL	Street or PO Address 1207 W. KIMRA		City MERIDIAN	State ID	Country USA	Postal Code 83642
5. Organized Under the Laws of:  <b>ID</b> <b>W 88662</b>		6. Annual Report must be signed.*  Signature: Travis Walthall Name (type or print): Travis Walthall  Date: 11/12/2010 Title: Managing Member					
Processed 11/12/2010 * Electronically provided signatures are accepted as original signatures.							