No. <b>W 5133</b>		Due no later than Dec 31, 2009		2. Registered Age	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.  ROOTIEVILLE, L.L.C. DOUG HIX 2140 HEYREND WAY IDAHO FALLS ID 83402		DOUGLAS N HIX 2140 HEYREND WAY IDAHO FALLS ID 83402  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nar	nes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER MANAGER	NAGER ROBERT KEEGAN		2140 HEYREND WAY PO BOX 406 320 2ND AVE N	IDAHO FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA USA	83402 83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Doug N Hix		Date: 10/20/2009				
W 5133		Name (type or print): Doug N Hix		Title: Manager				
Processed 10/20/2009 * Electronically provided signatures are accepted as original signatures.								