

No. W 105465		Due no later than Aug 31, 2012 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. SLEEP RITE SLEEP CENTERS LLC ERIC N. DAHLE 2443 E FIRST ST FRUITLAND ID 83619		ERIC DAHLE 2443 E FIRST ST FRUITLAND ID 83619			
						3. <u>New</u> 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	ERIC N. DAHLE	2443 E. FIRST ST.	FRUITLAND, IDAHO	ID	USA	83619	
5. Organized Under the Laws of: ID W 105465		6. Annual Report must be signed.* Signature: Eric N. Dahle Name (type or print): Eric N. Dahle Date: 06/30/2012 Title: Member					
Processed 06/30/2012 * Electronically provided signatures are accepted as original signatures.							