No. <b>W 20245</b>	Annual Report FormSUE	gistered Agent and Office NO PO BOX A BOSWELL B HIGHWAY 52 WEST
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address - Correct in the BOSWELL INSURANCE SERVICES, LLC 6103 HIGHWAY 52 WEST EMMETT, ID 83617	METT, ID 83617
BOISE, ID 83720-0080  NO FILING FEE IF	3. <u>Ne</u>	w Registered Agent Signature
RECEIVED BY DUE DATE	Enter Names and Addresses of Managers.	
<ol> <li>Limited Liability Compar</li> </ol>	nies: Enter Names and Addresses of Managers.	State <u>Zip</u>
Office held Name	Street or P.O. Address	TH QU
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marriage State		0000
5. Organized Under the Laws of:	6. Signature Ju Den U	1 (14/05
5. Organized Under the Laws of:	6. Jule	Date 6/6/05  Title manager  200508000892