

| | | | | | | | |
|-----------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|-------------|----------------|----------------------|
| No. W 71431 | | Due no later than Feb 28, 2009 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 | | 1. Mailing Address: Correct in this box if needed. MARK CORNELISON, ATTORNEY AT LAW, PLLC MARK CORNELISON 1562 E AIRPORT RD BLACKFOOT ID 83221 | | MARK CORNELISON 66 E RIVER RD BLACKFOOT ID 83221 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 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 MARK CORNELISON | Street or PO Address 1562 E AIRPORT RD | | City BLACKFOOT | State ID | Country USA | Postal Code 83221 |
| 5. Organized Under the Laws of: ID W 71431 | | 6. Annual Report must be signed.* Signature: Mark Cornelison Name (type or print): Mark Cornelison Date: 12/22/2008 Title: Manager | | | | | |
| Processed 12/22/2008 * Electronically provided signatures are accepted as original signatures. | | | | | | | |