

No. W 63165	Due no later than May 31, 2009	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address - Correct in this box. if applicable 2819 OHIO, LLC 9387 N SNAFFLE BIT LN KUNA, ID 83634	TAMI MCHUGH 9387 N SNAFFLE BIT LN KUNA, ID 83634
NO FILING FEE IF <u>RECEIVED BY DUE DATE</u> 4. Limited Liability Compa		3. <u>New</u> Registered Agent Signature
Entrited Liability Compa	nies: Enter Names and Addresses of Members.	
Member Tami N Member Tim Mc	Street or P.O. Address <u>City</u> Actual 9387 N. Snafle Bit In., 1 Hugh 9387 N. Snafle Bit In, K	<u>State</u> <u>Zip</u> Kura ID 83634 Kura IA 83634
5. Organized Under the Laws of: IDAHO W 63165	6. Signature <u>Ani McHugh</u> Name ^{(Typed or} <u>Tami McHugh</u>	Date 3/20/09 Title Member
Issued 03/02/2009	Do Not Tape or Staple	200905008803