No. W 68590		Due no later than Nov 30, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. SLINGER'S LLC MIKE SPRINGER 12488 W MEDALIST DR BOISE ID 83709		2.	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					MIKE SPRINGER 12488 W MEDALIST DR BOISE ID 83709 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at	least one Member or Manager					
Office Held	Name	nes and Addresses of at	Street or PO Address	C	ity	State	Country	Postal Code
MEMBER MIKE SPRIN		GER	12488 W MEDALIST DR	В	OISE	ID	USA	83709
5. Organized Under the Laws of: ID W 68590		6. Annual Report must be signed.* Signature: M Springer Name (type or print): M Springer			Date: 12/23/2009 Title: Member			
Processed 12/23/2009 * Electronically provided signatures are accepted as original signatures.								