No. W 4657		Due no later than Sep 30, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed.		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:				The state of the s	RANDY FULLMER 752 E TRINIDAD DR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		BOONDOCKS PROPEI RANDY FULLMER P O BOX 1030 MERIDIAN ID 8368	RTIES, LLC	MERIDIAN ID 83642 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER RANDY L FUL			660 E FRANKLIN RD SUITE 270	MERIDIAN	ID	USA	83680	
MANAGER MEMBER	RANDY L FULLMER DAMON J DAY		752 EAST TRINIDAD DR. 13078 WEST ELMSPRING ST.	MERIDIAN BOISE	ID ID	USA USA	83642 83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ИТ W 4657		Signature: Randy Fullmer		Date: 07/18/2011				
		Name (type or print): Randy Fullmer		Title: Manager				
Processed 07/18/2011	* Electronically provided signatures are accepted as original signatures.							