

No. W 11614

Due no later than March 31, 2009

Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

CHL, LLC
9000 W SAMUEL
POCATELLO, ID 83204CLESIE H LEWIS
9000 W SAMUEL
POCATELLO, ID 83204**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Mgr MEMBER	CLESIE LEWIS	9000 W. SAMUEL	POCATELLO	ID	83204
Mgr MEMBER	SAUNDRA LEWIS	9000 W. SAMUEL	POCATELLO	ID	83204

5. Organized Under the Laws of:

IDAHO
W 11614

6.

Signature

Name (Typed or Printed)

CLESIE LEWIS

Date

1-23-09

Title

Mgr. Member

Issued 01/05/2009

Do Not Tape or Staple

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