No. C 50651 Return to:		Due no later than Jan 31, 2013 Annual Report Form			Registered Agent and Address (NO PO BOX) LAYNE RASMUSSEN			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RASMUSSEN, INC. LAYNE RASMUSSEN P. O. BOX 39 BURLEY ID 83318		29 SOUTH BURLEY II	29 SOUTH 500 WEST BURLEY ID 83318 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY 0	GAYLE L. RA	ASMUSSEN	29 SOUTH 500 WEST	BURLEY	ID	USA	83318	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Layn		Date: 11/08/2012				
C 50651		Name (type or p		Title: President				
Processed 11/08/2012	ocessed 11/08/2012 * Electronically provided signatures are accepted as original signatures.							