

No. W 80871		Due no later than Jan 31, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. RIVERCITY INSURANCE AGENCY LLC LONNI WILLIAMS 112 E SELTICE WAY POST FALLS ID 83854		LONNI WILLIAMS 3208 RADIANT STAR POST FALLS ID 83854			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	LONNI KAY WILLIAMS	3208 RADIANT STAR	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 80871		Signature: Lonni Williams				Date: 01/26/2010	
		Name (type or print): Lonni Williams				Title: Agency Owner	
Processed 01/26/2010		* Electronically provided signatures are accepted as original signatures.					