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| No. W 50917 | | Due no later than May 31, 2007 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. CARICO FINANCIAL SERVICES, LLC LAUREL CARIGNAN 2480 ROANOKE DR BOISE ID 83712 | | LAUREL CARIGNAN 2480 ROANOKE DR BOISE ID 83712 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held MANAGER | Name LAUREL CARIGNAN | Street or PO Address 2480 ROANOKE DR | | City BOISE | State ID | Country USA | Postal Code 83712 |
| 5. Organized Under the Laws of: ID W 50917 | | 6. Annual Report must be signed.* Signature: Laurel Carignan Name (type or print): Laurel Carignan Date: 06/21/2007 Title: President | | | | | |
| Processed 06/21/2007 * Electronically provided signatures are accepted as original signatures. | | | | | | | |