No. <b>W 97313</b>	Due no later than Oct 31, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	SCOTT LEWIS			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	1450 NORTHWEST BLVD STE 301 COEUR D ALENE ID 83814			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	POST OAK PARTNERS LLC SCOTT LEWIS 2600A E SELTICE WY #294				
	POST FALLS ID 83854	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE					
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 TERRY LEW		POST FALLS	ID	USA	83854
MEMBER SCOTT LEV	VIS 2110 TRIUMPH CT	POST FALLS	ID	USA	83854
6. Annual Report must be signed.*					
ID	Signature: Scott Lewis	Date: 11/14/2012			
W 97313	Name (type or print): Scott Lewis	Title: Member			
Processed 11/14/2012	* Electronically provided signatures are accepted as original signatures.				