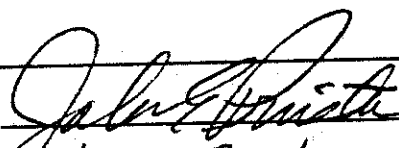


| No. W 57154 | | Due no later than December 31, 2007 Annual Report Form | | 2. Registered Agent and Office NO PO BOX | | | | | | | | | | | | | |
|---|------------------|--|-------|--|-------|-------------|------|------------------------|------|-------|-----|--------|------------------|------------------|-------|----|-------|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address - Correct in this box, if applicable | | JOHN E PRIESTER 262 N HULLEN PL STAR, ID 83669 | | | | | | | | | | | | | |
| | | JOHN E. PRIESTER CONSULTING, PLLC 262 N HULLEN PL STAR, ID 83669 | | 3. New Registered Agent Signature | | | | | | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>MEMBER</td><td>JOHN E. PRIESTER</td><td>262 N. HULLEN PL</td><td>STAR,</td><td>ID</td><td>83669</td></tr></tbody></table> | | | | | | Office held | Name | Street or P.O. Address | City | State | Zip | MEMBER | JOHN E. PRIESTER | 262 N. HULLEN PL | STAR, | ID | 83669 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | |
| MEMBER | JOHN E. PRIESTER | 262 N. HULLEN PL | STAR, | ID | 83669 | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 57154 | | 6. Signature  Date 10/13/07 Name (Typed or Printed) John E. Priester Title MEMBER | | | | | | | | | | | | | | | |

Issued 10/01/2007

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