

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-04-1992

No. 1099	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	RICHARD D HIMBERGER
Secretary of State	Mailing Address - Please Correct if Not Correct	380 E PARK CENTER BLVD STE 32
700 W Jefferson	LYONS & HIMBERGER, P.L.L.C.	BOISE ID 83706
P.O. Box 83720	RICHARD D HIMBERGER	3. Organized Under The Laws of
Boise, ID 83720-0080	380 E PARK CENTER BLVD STE 320	ID
* FIRST NOTICE *	BOISE ID 83706	NO: 1099
NO FEE REQUIRED		

4. Names and Addresses of ☐ Managers or ☒ Members (check one)	MUST BE PRINTED OR TYPED										
<table border="0"> <tr> <td>Name</td> <td>Street or P.O. Address</td> <td>City</td> <td>State</td> <td>Zip</td> </tr> </table>	Name	Street or P.O. Address	City	State	Zip						
Name	Street or P.O. Address	City	State	Zip							
<table border="0"> <tr> <td>Richard D. Himberger, P.L.L.C.</td> <td>380 E. Parkcenter Blvd.</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td></td> <td>Suite 320</td> <td></td> <td></td> <td></td> </tr> </table>	Richard D. Himberger, P.L.L.C.	380 E. Parkcenter Blvd.	Boise	ID	83706		Suite 320				
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	Suite 320										

5. Signature of the Current Registered Agent	6. I certify that this Annual Report has been examined by me and is to the best of my
(if changed in block 2)	knowledge true, correct and complete.
Richard D. Himberger	Signature Richard D. Himberger Date 11 AUG 95
	Name (Typed or Printed)