No. W 106577 Return to:		Due no later than Sep 30, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. MACLARKSON, LLC ANNE C CLARKSON 3973 BELL COURT NAMPA ID 83686		_	2. Registered Agent and Address (NO PO BOX) ANNE C CLARKSON 3973 BELL COURT NAMPA ID 83686 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresses o	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	C	ity	State	Country	Postal Code
MANAGER	ANNE C CL	ARKSON	3973 BELL COURT	N	AMPA	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Anne C Clarkson			Date: 10/16/2012			
W 106577		Name (type or print): Anne C Clarkson			Title: Manager			
Processed 10/16/2012 * Electronically provided signatures are accepted as original signatures.								