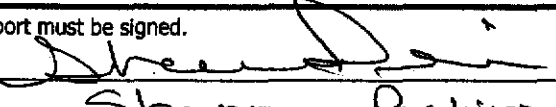


No. W 20063	Due no later than 7/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		CASEY M PERKINS 838 E 330 S DIETRICH ID 83326 3. New Registered Agent Signature:
	LIVE WIRE, L.L.C. PO BOX 1030 SHOSHONE ID 83352		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Zip
member	Casey Perkins	P.O. Box 1030 Shoshone	ID 83352
member	Shanna Perkins	P.O. Box 1030 Shoshone	ID 83352
5. Organized Under the Laws of:		6. Annual Report must be signed.	
ID W 20063		Signature:  Name(type or print): <u>Shanna Perkins</u>	Date: <u>6/1/09</u> Title: <u>member</u>