No. <b>W 71511</b>			2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			OTT MAUSER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			1020 W MAIN ST STE 320 BOISE ID 83702			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			0.1-0-0				
			3. <u>New</u> Regis	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF	110 1 10 1 1						
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 THOMAS W	MOUSER	1020 W MAIN ST STE 320	BOISE	ID	USA	83702	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: Thomas \		Date: 02/28/2012				
W 71511	Name (type or print)		Title: Member				
Processed 02/28/2012	* Electronically provided signatures are accepted as original signatures.						