

No. W 35043

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

1. Mailing Address - Correct in this box, if applicable

CLAVER'S AUTO PAINTING, LLC  
132 SOUTH 1000 WEST  
BLACKFOOT, ID 83221

LINNIE CLAVER  
132 SOUTH 1000 WEST  
BLACKFOOT, ID 83221

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	LINNIE CLAVER	132 So. 1000 W	BLACKFOOT	ID	83221

5. Organized Under the Laws of:  
IDAHO  
W 35043

6. Signature Linnie Claver Date 11-15-07  
Name (Typed or Printed) LINNIE CLAVER Title MEMBER

Issued 10/01/2007

Do Not Tape or Staple

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