No. W 55274 Return to:		Due no later than Oct 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX) JEFF CAVEN 239 HAWKINS RD SAGLE ID 83860 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CAVEN ENTERPRISES, LLC PO BOX 92 SANDPOINT ID 83864	SAGLE ID 8				
NO FILING FEE IF RECEIVED BY DUE DATE 4 Limited Liability Companies: Enter Nar		nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	JEFF CAVEN	PO BOX 92	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
110		Signature: Jeff Caven	Date: 08/15/2011				
W 55274		Name (type or print): Jeff Caven	•	Title: Manager			
Processed 08/15/2011 * Electronically provided signatures are accepted as original signatures.							