No. W 85867					egistered Agent and Address (NO PO BOX)		
Return to:		Annual Report Form		ROBERT MCKAIN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MASTERPIE ROBERT MO	INSMOKE DR	BOISE ID	12133 W GUNSMOKE DR BOISE ID 83713 8. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER FRANCES	R MCKAIN	12133 W GUNSMOKE DR	BOISE	ID	USA	83713	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: I	Robert McKain		Date: 07/06/2010			
W 85867	Name (type	Name (type or print): Robert McKain		Title: Member			
Processed 07/06/2010	* Electronically	* Electronically provided signatures are accepted as original signatures.					