No. W 97841		Due no later than Nov 30, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MASTERMINDS AUTOREPAIR & EXHAUST, L.L.C. JOSH D PERKINS 6680 GOVERNMENT WAY STE 204 DALTON GARDENS ID 83815		3308 N 4TH	JOSH PERKINS 3308 N 4TH ST COEUR D ALENE ID 83815			
				3. <u>New</u> Registo	3. New Registered Agent Signature:*			
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	s of at least one Member or Manager.	'				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	COREY A R	OBINSON	13485 E. NUNN RD	ATHOL	ID	USA	83801	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Josh Perkins			Date: 09/12/2011			
W 97841		Name (type or print): Josh Perkins			Title: Manager			
Processed 09/12/2011 * Electronically provided signatures are accepted as original signatures.								