No. W 60402		Due no later than Mar 31, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. WATER WEED REPEAT, LLC ANDREW FALES PO BOX 9026 BOISE ID 83707		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				ANDREW FALES 202 N 9TH ST STE 202 BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		and Address of the	Joseph and Marchan on Marchan				
200 80 9	es: Enter Nai Name	nes and Addresses of at	Street or PO Address	City	State	Country	Postal Code
			1533 N MILWAUKEE ST STE 107	BOISE	ID	USA	83704
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 60402		Signature: Andrew Fales		Date: 03/31/2009			
		Name (type or print)	Title: Agent				
* Electronically provided signatures are accepted as original signatures.							