No. W 95027		Due no later than Jul 31, 2011			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SCOTT GALLINA			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. DAYBREAK COFFEE CO. LLC GOFFINET & CLACK PO BOX 629 OROFINO ID 83544		1229 MAIN LEWISTON ID 83501				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GOFFINET							
	OROFINO			3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	:							
4. Limited Liability Companies: E	nter Names and Addre	sses of at least one Member or Manager.						
Office Held Name	e	Street or PO Address	City		State	Country	Postal Code	
	'E BARHAM	7413 W. NIGHTHAWK		FALLS	ID	USA	83854	
MEMBER MARI	SA WAGNER	7413 W. NIGHTHAWK	POST	Γ FALLS	ID	USA	83854	
5. Organized Under the Laws of: 6. Annual R		port must be signed.*						
ID	Signature:	Signature: Carrie Donovan			Date: 05/25/2011			
W 95027	Name (type	Name (type or print): Carrie Donovan			Title: Bookkeeper			
Processed 05/25/2011	* Electronicall	* Electronically provided signatures are accepted as original signatures.						