

No. <b>W 2116</b>	<b>Due no later than Feb 28, 2002 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable		MATTHEW LINSKOTT 105 PINE ST STE 103  SANDPOINT, ID 83864												
	LAN NOR DEL LLC MATTHEW LINSKOTT 105 PINE ST STE 103  SANDPOINT, ID 83864														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>MATTHEW LINSKOTT</td> <td>105 PINE ST. STE 103</td> <td>SANDPOINT</td> <td>ID</td> <td>83864</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	MATTHEW LINSKOTT	105 PINE ST. STE 103	SANDPOINT	ID	83864
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	MATTHEW LINSKOTT	105 PINE ST. STE 103	SANDPOINT	ID	83864										
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 2116</div>	6. Signature <u>Matthew Linskott</u> Date <u>12-10-01</u> Name (Typed or Printed) <u>MATTHEW LINSKOTT</u> Title <u>MANAGER</u>														