No. W 41659 Return to:			Due no later than August 31, 2008 Annual Report Form				2. Registered Agent and Office NO PO BOX	
SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		TB CON TREVOR 1408 FA	1. Mailing Address - Correct in this box, if applicable TB CONSTRUCTION, LLC TREVOR BONFIGLIO 1408 FAIRVIEW AVE FRUITLAND, ID 83619				TREVOR BONFIGLIO 1408 FAIRVIEW AVE FRUITLAND, ID 83619	
						3. New Registered Agent Signature		
RECEIVED BY				1 1				
" Limited Lia	bility Compa	nies: Enter	Names and	d Addresse:	s of Mar	nagers.		
Office held	Name		reet or P.O. A			City	State	<u>Zip</u>
Manager Member	Trevor S. Renee L.	Bonfigl Bonfigli	10 1408 0 1408	Fairview Fairview	Ave. Ave.	Fruitlan Fruitlan	- 10	83619 83619
							griver i dige	
5. Organized Under the Laws of: IDAHO W 41659		6. Signature Name (Typed in Printed)	gna? Renee	Bonfi	igh8	Date 6/	18/08 per	
Issued 06/02/2008		Do Not Tape or Staple			200808006239			