

No. W 4525		Due no later than Aug 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. OLSON FISHER ENTERPRISES, L.C. MYRNA C. OLSON-FISHER P O BOX 68 KUNA ID 83634		MYRNA OLSON-FISHER 708 WYTHE CREEK CT. STE 103 KUNA ID 83634			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	MYRNA OLSON-FISHER	P O BOX 68	KUNA	ID	USA	83634	
MANAGER	DENNIS M FISHER	P O BOX 68	KUNA	ID	USA	83634	
5. Organized Under the Laws of: ID W 4525		6. Annual Report must be signed.* Signature: Dennis m Fisher Name (type or print): Dennis m Fisher					
		Date: 09/08/2011 Title: Manager					
Processed 09/08/2011		* Electronically provided signatures are accepted as original signatures.					