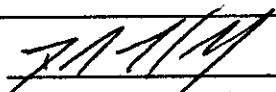
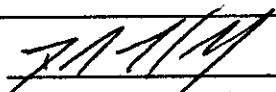
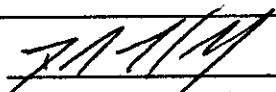


No. W 43122	Due no later than September 30, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX DAVID HEFFERNAN 13125 W PERSIMMON LN STE 150 BOISE, ID 83713 3999 E. Overland Rd. Meridian, ID 83642 3. <u>New</u> Registered Agent Signature
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable DAVID HEFFERNAN INSURANCE LLC DAVID HEFFERNAN 3791 N LEGACY COMMON AVE MERIDIAN, ID 83642		

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	David Heffernan	3791 N. Legacy Common Ave.	Meridian	ID	83642

5. Organized Under the Laws of: IDAHO W 43122	<table style="width: 100%;"> <tr> <td style="width: 60%;"> 6. Signature  </td> <td style="width: 40%;"> Date 7/11/06 </td> </tr> <tr> <td> Name (Typed or Printed) David Heffernan </td> <td> Title Manager </td> </tr> </table>	6. Signature 	Date 7/11/06	Name (Typed or Printed) David Heffernan	Title Manager
6. Signature 	Date 7/11/06				
Name (Typed or Printed) David Heffernan	Title Manager				