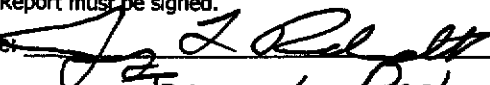
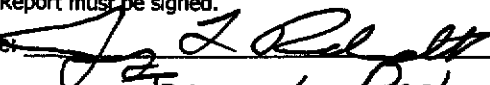
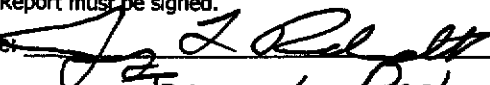


No. W 54609	Due no later than 9/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		JERRY L RADANDT SR 140 E SOUTH SLOPE RD EMMETT ID 83617 3. <u>New</u> Registered Agent Signature:												
	BACK COUNTRY ENTERPRISES, LLC JERRY L RADANDT SR PO BOX 278 EMMETT ID 83617														
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. <table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>MANAGER</td><td>JERRY L. RADANDT</td><td>140 E S SLOPE RD</td><td>EMMETT</td><td>IDA</td><td>83617</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Zip	MANAGER	JERRY L. RADANDT	140 E S SLOPE RD	EMMETT	IDA	83617
Office Held	Name	Street or PO Address	City	State	Zip										
MANAGER	JERRY L. RADANDT	140 E S SLOPE RD	EMMETT	IDA	83617										
5. Organized Under the Laws of: ID W 54609	6. Annual Report must be signed. <table border="1"><tr><td>Signature: </td><td>Date: <u>7-29-09</u></td></tr><tr><td>Name(type or print): <u>JERRY L. RADANDT</u></td><td>Title: <u>MANAGER</u></td></tr></table>			Signature: 	Date: <u>7-29-09</u>	Name(type or print): <u>JERRY L. RADANDT</u>	Title: <u>MANAGER</u>								
Signature: 	Date: <u>7-29-09</u>														
Name(type or print): <u>JERRY L. RADANDT</u>	Title: <u>MANAGER</u>														

Issued 7/27/2009 by NLB

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