No. J 1604 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than May 31, 2009 Annual Report Form	2. Registered Agent and Address (NO PO BOX) CHERYL LYNCH			
		1. Mailing Address: Correct in this box if needed. WORD EXPRESSIONS L.L.P. CHERYL LYNCH 4885 GEMMETT CREEK RD IDAHO FALLS ID 83401	4885 GEMMET CREEK RD IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
4. Limited Liability Partne	erships: Enter Na	mes and Business Addresses of two (2) or more partners.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PARTNER PARTNER	JULIE LOFTU CHERYL LYNC		IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83401 83401
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID J 1604		Signature: Cheryl Lynch	Date: 06/01/2009			
		Name (type or print): Cheryl Lynch	Title: Owner			
Processed 06/01/2009		* Electronically provided signatures are accepted as original signatures	gnatures.			