

No. W 64854	Due no later than July 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX DAVID KRISTIAN ANDERSEN 542 RANDOLPH AVE POCA TELLO, ID 83201												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	3. Filing Address (correct in the box if applicable) DKA FINANCIAL, LLC 542 RANDOLPH AVE POCA TELLO, ID 83201	3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>David Kristian Andersen</td> <td>542 Randolph</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Member	David Kristian Andersen	542 Randolph	Pocatello	ID	83201
Office held	Name	Street or P.O. Address	City	State	Zip									
Member	David Kristian Andersen	542 Randolph	Pocatello	ID	83201									
5. Organized Under the Laws of: IDAHO W 64854	6. Signature <u>David Kristian Andersen</u> Date _____ Name (Typed or Printed) <u>David Kristian Andersen</u> Title <u>Member</u>													

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Do Not Tape or Staple

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