| No. W 22677 | Due no later than February 28, 2009 Annual Report Form | | 2. Registered Agent and Office NO PO BOX | | |
|---|--|-------------------|---|-------------------|--|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 | 1 Mailing Address - Correct in this box, if | applicable | JARIN O HAMMI 2105 CORONAD IDAHO FALLS, I | DO ST | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | 3. New Registere | d Agent Signature | |
| 4. Limited Liability Compar | nies: Enter Names and Addresses of Me | embers. | | | |
| Office held Name | Street or P.O. Address | City | State | <u>Zie</u> | |
| President Kristoph COO William S | ver Caelisle 356 S Park Ave Nyder 1417N 1000E | Sheller | j | 83274 | |
| N= A.m.la | 141 IN 1000E | Shelle | 4 10 | 83274 | |
| 1 LFD Moyeur | Cartisle 356 Spark Ave | Shelle | 4 10 | 83274 | |
| secretary Lori S | Nyder 1417N 1000E | Shelle | | 83274 | |
| | | | | | |
| 5. Organized Under the Laws of: IDAHO | 6. Signature | Signature // // / | | Date 2/10/09 | |
| W 22677 | Name Printed or Kris Caplisle | | Title PRES. | | |
| Issued 12/01/2008 | Do Not Tape or Stap | le | 20 | 0902005653 | |