

No. W 67674		Due no later than Oct 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		KARI SACCOMANNO 199 N CAPITOL #908 BOISE ID 83702			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ADAHO, LLC KARI SACCOMANNO PO BOX 608 BOISE ID 83701					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KARI SACCOMANNO	199 N CAPITOL #908	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 67674		Signature: Kari Saccomanno			Date: 08/20/2012		
		Name (type or print): Kari Saccomanno			Title: Manager		
Processed 08/20/2012		* Electronically provided signatures are accepted as original signatures.					