No. W 90370		Due no later than Feb 29, 2012		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SOPHIA LARROQUE LLC SOPHIA LARROQUE 2490 BOGUS BASIN RD BOISE ID 83702		2490 BOGU	SOPHIA LARROQUE 2490 BOGUS BASIN RD BOISE ID 83702 3. New Registered Agent Signature:*			
				3. <u>New</u> Regist				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	SOPHIA A LARROQUE		2490 BOGUS BASIN RD	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 90370		Signature: SophiaLarroque			Date: 12/19/2011			
		Name (type or		Title: Manager				
Processed 12/19/2011	* Electronically provided signatures are accepted as original signatures.							