No. <b>W 67909</b> Return to:		Due no later than Oct 31, 2008 Annual Report Form  1. Mailing Address: Correct in this box if needed.  NXS, LLC  NICK CLAUNCH  3230 S NINA  IDAHO FALLS ID 83404  USA		2	2. Registered Agent and Address (NO PO BOX)  NICK CLAUNCH 3230 S NINA IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nar	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	NICK CLAUNCH		3230 S NINA		IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 67909		Signature: Nick Claunch			Date: 11/24/2008			
		Name (type or print): Nick Claunch			Title: Manager			
Processed 11/24/2008 * Electronically provided signatures are accepted as original signatures.								