

No. W 60526	Due no later than March 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX SHIRLEY K AMICK 10096 CROWN DR BOISE, ID 83709												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable JAYVEE LLC 10096 CROWN DR BOISE, ID 83709	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">MANAGER</td> <td style="vertical-align: top;">SHIRLEY K AMICK</td> <td style="vertical-align: top;">- 10096 CROWN DRIVE</td> <td style="vertical-align: top;">BOISE</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83709</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	SHIRLEY K AMICK	- 10096 CROWN DRIVE	BOISE	ID	83709
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
MANAGER	SHIRLEY K AMICK	- 10096 CROWN DRIVE	BOISE	ID	83709									
5. Organized Under the Laws of: IDAHO W 60526	6. Signature <u><i>Shirley K Amick</i></u> Date <u>3/14/2008</u> Name <small>(Typed or Printed)</small> <u>SHIRLEY K. AMICK</u> Title <u>MDGR</u>													