No. W 62405		e no later than May 31, 2011	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		R MICHAEL BOGE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RICHARDSON MICHAEL BO	1. Mailing Address: Correct in this box if needed. RICHARDSON, L.L.C. MICHAEL BOGE 332 S EUCLID SANDPOINT ID 83864 USA		332 S EUCLID SANDPOINT ID 83864			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter	Names and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER R MICH MANAGER ANAVEL	EL BOGE L BOGE	332 S EUCLID 332 S EUCLID	SANDPOINT SANDPOINT	ID ID	USA USA	83864 83864	
5. Organized Under the Laws of: 6. Annual Re		t must be signed.*					
ID	Signature: M	Signature: Michael Boge		Date: 04/29/2011			
W 62405	Name (type o	Name (type or print): Michael Boge		Title: Manager			
Processed 04/29/2011	* Electronically p	* Electronically provided signatures are accepted as original signatures.					