

No. W 32557		Due no later than Aug 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HR BENEFITS & RISK MANAGEMENT, LLC MARY OLSEN PO BOX 190646 BOISE ID 83719-0646		MARK OLSEN 2969 S GIVENS WAY MERIDIAN ID 83642			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
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	MARY OLSEN	2969 S GIVENS WAY	MERIDIAN	ID	USA	83642	
MEMBER	MARK D OLSEN	2969 S GIVENS WY	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of: ID W 32557		6. Annual Report must be signed.* Signature: Mary Olsen Name (type or print): Mary Olsen					
		Date: 06/16/2011 Title: Managing Member					
Processed 06/16/2011 * Electronically provided signatures are accepted as original signatures.							