

No. W 5849		Due no later than Mar 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SMOKE INN, LLC JAY LILES 3912 W. STATE ST BOISE ID 83703		JAY K. LILES 3912 W. STATE ST BOISE ID 83703			
				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	RICHARD K. LILES	3850 HILL RD	BOISE	ID	USA	83703	
MANAGER	BONNIE J. LILES	3850 HILL RD	BOISE	ID	USA	83703	
MANAGER	JAY K. LILES	4810 N FORTUNE LANE #101	BOISE	ID	USA	83703	
5. Organized Under the Laws of: ID W 5849		6. Annual Report must be signed.* Signature: Jay K. Liles Name (type or print): Jay K. Liles Date: 02/05/2012 Title: Owner					
Processed 02/05/2012		* Electronically provided signatures are accepted as original signatures.					