

No. W 69312

Due no later than December 31, 2008
Annual Report Form2. Registered Agent and Office **NO PO BOX**Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

REKOGNIZE, LLC
1905 S ABBS STREET
BOISE, ID 83705MARK BILLINGS
3083 WEST WIND DRIVE
EAGLE, ID 83616**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Stephanie Billings	1905 S. Abbs St.	Boise	ID	83705

5. Organized Under the Laws of:

IDAHO
W 69312

6.

Signature

Stephanie Billings

Date

10-10-08

Name (Typed or Printed)

Stephanie Billings

Title

Member

Issued 10/01/2008

Do Not Tape or Staple

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