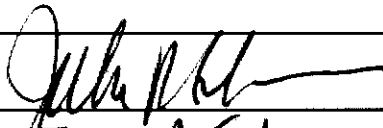


No. W 949	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX JOHN SCHERER 500 S. Main St #204 KETCHUM ID 83340
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct. If Not Correct		3. Organized Under the Laws of: ID W 949
	CEDAR BEND, LIMITED LIABILIT JOHN SCHERER PO BOX 2127 KETCHUM ID 83340		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
MANAGER	John Scherer	Box 1584	Ketchum ID 83340
5. <u>New</u> Registered Agent Signature		6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="text-align: center;">  Signature _____ Name (Typed or Printed) John R Scherer </div> <div style="text-align: center;"> Date 10-8-99 Title Manager </div> </div>	
ISSUED: 10-02-1999		549	