

No. <b>W 12096</b>		<b>Due no later than May 31, 2008</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  LUPIN, LIMITED LIABILITY COMPANY PO BOX 457 VICTOR ID 83455		JAMES M ST CLAIR 726 LAKESIDE DRIVE VICTOR ID 83455			
				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	JAMES M ST. CLAIR	726 LAKESIDE DR.	VICTOR	ID	USA	83455	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 12096</b>		Signature: James M. St.Clair			Date: 05/26/2008		
		Name (type or print): James M. St.Clair			Title: Managing Member		
Processed 05/26/2008		* Electronically provided signatures are accepted as original signatures.					