No. <b>W 100687</b> Return to:		Due no later than Feb 29, 2012 Annual Report Form  1. Mailing Address: Correct in this box if needed.  ADL ENTERPRISES, LLC AARON F. THOMAS 965 N 14TH EAST STREET MOUNTAIN HOME ID 83647 USA			2. Registered Agent and Address (NO PO BOX)  AARON THOMAS  965 N 14TH EAST STREET  MOUNTAIN HOME ID 83647  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				M					
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of	at least one Member or Manager.						
Office Held	Name		Street or PO Address	City	У	State	Country	Postal Code	
MANAGER	AARON F T	HOMAS	965 N.14TH EAST STREET	МО	UNTAIN HOM	E ID	USA	83647	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Aaron F. Thomas			Date: 12/13/2011				
W 100687		Name (type or print): Aaron F. Thomas			Title: Manahger				
Processed 12/13/2011 * Electronically provided signatures are accepted as original signatures.									