No.	C115618	Annual Report Form Due No Later Than November 30. 1999	2. Registered Agent a	and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE		Mailing Address - Please Correct. If Not Correct	GARY F JO	DHNSON 5th
PO 8 BOIS	BOX 83720 SE, ID 83720-0080	3 AMIGOS INSURANCE, INC. GARY F JOHNSON 1301 E 16TH	BURLEY	ID 83318
	FIRST NOTICE *	Business Addresses of President, Secretary and Directors	3. Organized Under t	C115618
Lin	mited Liability Companies: Ent	er Names and Addresses of Managers or Member	s (check one)	On
	fice held Name R&S. GARY F	Johnson 130/ E 16th	<u>city</u> Burley	State Zip FNA 833 A
,	• ,	Hiedeman. 2675 FA; Romant	BURKEY	FOR 833/8
DiR	Pector badawn	ValASCO 123 W 6th	Burley	FOR 83318
5. Sig	nature of New Registered		noon Date	8-6-99
		Name (Typed or FARY F JOHN	So V Title _	pres.
	ISSUED: 07-03-1	999	e	5117