

No. <b>W 58740</b>	<b>Due no later than Feb 28, 2011</b> <b>Annual Report Form</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>  OVER THIRTY-FIVE LLC NANCY SWEARINGEN 613 BRYDEN AVE STE C #356 LEWISTON ID 83501		NANCY SWEARINGEN 613 BRYDEN AVE STE C #356 LEWISTON ID 83501			
			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	NANCY SWEARINGEN	613 BRYDEN AVE STE C #356	LEWISTON	ID	USA	83501
5. Organized Under the Laws of:  <b>WA</b> <b>W 58740</b>	6. Annual Report must be signed.* Signature: Nancy Swearingen Name (type or print): Nancy Swearingen		Date: 01/27/2011 Title: Manager			
Processed 01/27/2011		* Electronically provided signatures are accepted as original signatures.				