

No. W 60402		Due no later than Mar 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WATER WEED REPEAT, LLC ANDREW FALES PO BOX 9026 BOISE ID 83707		ANDREW FALES 202 N 9TH ST STE 202 BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ANTHONY J LISTER	Street or PO Address 1533 N MILWAUKEE ST STE 107		City BOISE	State ID	Country USA	Postal Code 83704
5. Organized Under the Laws of: ID W 60402		6. Annual Report must be signed.* Signature: Andrew Fales Name (type or print): Andrew Fales Date: 02/28/2011 Title: Agent					
Processed 02/28/2011 * Electronically provided signatures are accepted as original signatures.							