No. C 79834		Due no later than Nov 30, 2013		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CONNIE FUNK			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SCJ, INC. ALLEN COLLINS 210 S MAIN STREET STE I PO BOX 715			210 S MAIN ST POCATELLO ID 83204 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		POCATELLO ID 83204-0511 USA						
4. Corporations: Enter Name	es and Busine	ess Addresses of Pre	sident, Secretary, and Directors. Trea	asurer (op	otional).			
Office Held	Name		Street or PO Address	(City	State	Country	Postal Code
	SHARON KNUDSEN CONNIE G FUNK		2595 HIGHWAY 39 2065 E 2800 WEST		AMERICAN FALLS ABERDEEN	ID ID	USA USA	83211 83210
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 79834		Signature: Allen Collins			Date: 10/01/2013			
		Name (type or print): Allen Collins			Title: Cpa			
Processed 10/01/2013	* Electronically provided signatures are accepted as original signatures.							