No. W 84725 Return to:	Due no late Annua	BOX)	Registered Agent and Office (NOT A P.O. BOX)     KEITH RASMUSSEN				
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720	1. Mailing Address: Correct in this box if needed. GABLES OF POCATELLO, LLC			1396 SATTERFIELD DR POCATELLO ID 83201			
NO FILING FEE IF RECEIVED BY DUE DATE	PO BOX 656 POCATELLO ID 832 USA			3. <u>New</u> Registered Agent Signature.			
4. Limited Liability Compan Manager or Member Nan							
Manager Member (circle one)	***************************************	Street or PO Address	City	State	Country しらA	Postal Code 83701	
Keith Rasmuss	en)	396 Satterfield					
5. Organized Under the Laws o	f: 6.	1 8///	,				
IDAHO	Signature:	Jan & Kass	· · · · · · · · · · · · · · · · · · ·		Date:	6/20/11	
		ht): Keith Rasmo	essen		Date:	5/20/11 max wher	

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either Member or Manager. Enter names and business addresses of managers or members of the limited liability company. Note: Do not put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include the title for each name listed.

**Block 5:** May not be altered through the use of this form.