

No. W 42714		Due no later than Sep 30, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		M BRADLEY WELLS 102 NORTH CLARK STREET RIGBY ID 83442			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		TOP POINTE FRAMING, LLC BRAD WELLS PO BOX 3253 IDAHO FALLS ID 83403 USA					
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	DARRIN SWEENEY	PO BOX 3253	IDAHO FALLS	ID	USA	83403	
MANAGER	BRAD WELLS	PO BOX 3253	IDAHO FALLS	ID	USA	83403	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 42714		Signature: Brad Wells			Date: 09/08/2009		
		Name (type or print): Brad Wells			Title: Manager		
Processed 09/08/2009		* Electronically provided signatures are accepted as original signatures.					