| | Due no later than December 31, 2005 |
|---------------------------------|--|
| Return to: | 2. Registered Agent and Office NO PO |
| SECRETARY OF STATE | 1. Mailing Address - Correct in this box, if applicable |
| 700 WEST JEFFERSON | ABILITISTIC |
| PO BOX 83720 | 1350 KEARNEY ST IDAHO FALLS, ID 83401 3081 |
| BOISE, ID 83720-0080 | IDAHO FALLS, ID 83401 3081 |
| NO FILING FEE IF | |
| RECEIVED BY DUE DATE | 3. New Registered Agent Signature |
| 4. Limited Liability Compar | nies: Enter Names and Addresses of Managers. |
| Office hald | mos. Enter Names and Addresses of Managers. |
| Office held Name | Street or P.O. Address Voiff 1350 Kearney St Idaho Falls ID 834015208 |
| Manager Denise C. h | Voiff 1350 Kenishe St Till State Zip |
| · · | Takno Falls #D 83401-308 |
| | |
| 5. Organized Under the Laws of: | 6. |
| IDAHO W 34970 | Signature Aenise (Wolf Date 10/16/2005 |
| IDAHO | Signature Hemise (Woff Date 10/16/2005 |