

No. W 56873

Due no later than December 31, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

TWO TAILS, LLC  
4503 FEDERAL WAY  
BOISE, ID 83716SALLY A NIHIPALI  
4503 FEDERAL WAY  
BOISE, ID 83716NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

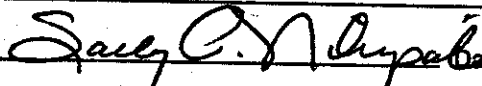
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Sally A. Nihipali	20721 Via Amarilla	Yorba Linda	CA	92886
Manager	Paul M. Nihipali	20721 Via Amarilla	Yorba Linda	CA	92886

5. Organized Under the Laws of:

IDAHO  
W 56873

6.

Signature



Date Oct. 9, 2008

Name (Typed or Printed)

Sally A. Nihipali

Title Member Manager

Issued 10/01/2008

Do Not Tape or Staple

200812008174