FILED EFFECTIVE OF THE STATE OF

| File Number:   | W20690 |
|----------------|--------|
| File Multiper. | WAUDYU |

## STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS

(see reverse for instructions)

| The entity identified be changing its business mailing | elow submits to the Secretary of address.          | State the following statement for the pur | pose of         |
|--|--|---|-----------------|
| 1. The name of the business of                         | entity is:T  | & D ENTERPRISES, LLC                      | <del></del>     |
| 2. The business mailing addr                           | ess is currently on file as:<br>PO BOX 155, BAYVIE | W, ID 83803                               |                 |
|  | NORTH FIRST AVENUE, SUITE                          |   |                 |
| 4. Change of address is effect Signed:                 | Upon Receipt OR                                    | (Date)                                    |                 |
| Printed Name:  | DALE R. PYNE                                       | _   |                 |
| Capacity:  | MANAGER  | _   |                 |
| Dated:   | 08/16/2005   | <u>-</u>                                  |                 |
| g:\corp\forms\miscforms\change_address.pmd             | FILE ONE COPY                                      |   | NO FEE REQUIRED |