

No. <b>W 51310</b>		<b>Due no later than Jun 30, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ALL IN ONE STORAGE & BUSINESS CENTER, LLC INAKI LETE 117 N KINGS RD NAMPA ID 83687		INAKI E LETE 117 N KINGS RD NAMPA ID 83687			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name INAKI E LETE	Street or PO Address 117 N KINGS RD		City NAMPA	State ID	Country USA	Postal Code 83687
5. Organized Under the Laws of:  <b>ID</b> <b>W 51310</b>		6. Annual Report must be signed.*  Signature: Inaki Lete Name (type or print): Inaki Lete  Date: 04/13/2009 Title: Manager					
Processed 04/13/2009      * Electronically provided signatures are accepted as original signatures.							