

No. J 1223

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

TROIKA RESTORATION, L.L.P.
PO BOX 1001
BLACKFOOT, ID 83221

SEAN C WILLIAMS
273 W PACIFIC
BLACKFOOT, ID 83221

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PARTNER	SEAN C. WILLIAMS	PO Box 1001	BLACKFOOT	ID	83221
PARTNER	JASON YOUNG	PO Box 1001	BLACKFOOT	ID	83221

5. Organized Under the Laws of:

IDAHO
J 1223

6.

Signature

Date 10.14.2008

Name (Typed or Printed)

SEAN C. WILLIAMS

Title

PARTNER