No.	C124626			Report Form r Than November 30,	1999	2. Registered Agent		li l
Return to: SECRETARY OF STATE			g Address - Pleas	E Correct of Not Correct MANAGEMENT,	TMC	STEPHEN 234 W 50		CA
PO B	WEST JEFFERSON OX 83720 E, ID 83720-0080	STE	PHEN E DI	LUCCA		JEROME	ID	83338
NO FEE REQUIRED  * FIRST NOTICE *		l l	234 W 500 S 376 FAILS AVE			3. Organized Under the Laws of:		
		* JER	TWO FAILS ID 87338		8	ID	C124	4626
	rporations: Enter Name nited Liability Companie			sident, Secretary and Di of Managers or		(check one)		
Offi	ice held N	ame	Stree	et or P.O. Address		City	State	<u>Zap</u>
Ph	ies St	ere Diluo	ca 379	. Folls due		Twinfols	FD.	8333/
5	EC Pa	m Diluc	nt nt	. Falls the		ę e	ŧ e	ě r
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5. Sigr	nature of New Regis	tered Agent	6. Signature	Sall		Date _	9/9/27	
			Name (Ty	ped or Steel D.C	<u>ارد۸</u>	Title _	Praz	
	155UED: 07-0	3-1999					6343	
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