A STATE OF THE STA		ater than May 31, 2011	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: Ann		ual Report Form	None Carrier and Parket Report Control	KERRY ARRITT			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		s: Correct in this box if needed. EMPLOYMENT OPTIONS LLC	BURLEY ID	1734 OVERLAND AVE BURLEY ID 83318			
NO FILING FEE IF		ID 83318		3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
			BURLEY BURLEY	ID ID	USA USA	83318 83318	
5. Organized Under the Laws of: 6. Annual Report mu		be signed.*					
ID	Signature: Kerry L A	Signature: Kerry L Arritt		Date: 03/21/2011			
W 30781	Name (type or print)	Name (type or print): Kerry L Arritt		Title: Member			
Processed 03/21/2011	* Electronically provided	* Electronically provided signatures are accepted as original signatures.					