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Organized Under the Laws of: IDAHO W 59117	Signature Name (Typed or Bennoon L. WELLS	Date DIJOIL2009
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	JEUS 279 MEADOWNEW LAND TWIN F	CAUS 1D 8330)
Limited Liability Companie	es: Enter Names and Addresses of Members. Street or P.O. Address City	State Zip
NO FILING FEE IF RECEIVED BY DUE DATE]3	. New Registered Agent Signature
450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		279 MEADOWVIEW LN TWIN FALLS, ID 83301
No. W 59117 Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable	2. Registered Agent and Office NO PO B BRANDON L WELLS