| No. W 75600 | | Due no later than Jun 30, 2009 | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------------|--|------------------------------|-------------------|--|---------|-------------|--|
| Return to: | | Annual Report Form | | | NICKOLE MULLEN | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. SUN SHINE CLEANERS L.L.C. CRYSTAL OTTEN PO BOX 140 SODA SPRINGS ID 83276 USA | | SODA SPRINGS | 1202 CRANE DR SODA SPRINGS ID 83276 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | anies: Enter Na | mes and Addresses of at | least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | CRYSTAL OTTEN | | PO BOX 140 | SODA SPRINGS | ID | USA | 83276 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 75600 | | Signature: Crystal Otten | | Date: 04/16/2009 | | | | |
| | | Name (type or print): Crystal Otten | | Title: Owner | | | | |
| Processed 04/16/2009 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |