

No. W 11614

Due no later than March 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

CHL, LLC
9000 W SAMUEL
POCATELLO, ID 83204

CLESIE H LEWIS
9000 W SAMUEL
POCATELLO, ID 83204

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
<i>mgr. M</i>	CLESIE LEWIS	9000 W SAMUEL	POCATELLO	IDAH0	83204
<i>mgr. M</i>	SAUNDRA LEWIS	9000 W SAMUEL	POCATELLO	IDAH0	83204

5. Organized Under the Laws of:
IDAHO
W 11614

6.

Signature

Name (Typed or Printed)

Clesie Lewis

CLESIE LEWIS

Date

1-11-08

Title

Mgr. Member

Issued 01/02/2008

Do Not Tape or Staple

200803006541