No. W 22678	Due no later than Feb 28, 2009	2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	Annual Report Form LYNETTE TUCKER 1. Mailing Address: Correct in this box if needed. 114 OLD OREGON F					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	PERSONAL ADVENTURES CONSULTING, LLC LYNETTE TUCKER 114 OLD OREGON RD	<u></u>	PO BOX 464 SODA SPRINGS ID 83276			
	PO BOX 464 SODA SPRINGS ID 83276		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF 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
MEMBER LYNETTE T	UCKER 114 OLD OREGON RD PO BOX	464	SODA SPRINGS	ID	USA	83276
MEMBER MICHAEL T	UCKER 114 OLD OREGON RD PO BOX	464	SODA SPRINGS	ID	USA	83276
5. Organized Under the Laws of:	6. Annual Report must be signed.*	al Report must be signed.*				
ID	Signature: Lynette Tucker Date: 12/23/2008					
W 22678	Name (type or print): Lynette Tucker	Title: Officer				
Processed 12/23/2008	* Electronically provided signatures are accepted as original signatures.					