

No. W 6113		Due no later than May 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. INDEPENDENT CONSULTANTS, L.L.C. TOM ELLEFSON PO BOX 3357 HAYDEN ID 83835		TOM ELLEFSON 11822 KENISNGTON HAYDEN ID 83835	
				3. <u>New</u> Registered Agent Signature:*	
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	TOM ELLEFSON	514 NORTH 20TH ST	COEUR D'ALENE	ID	USA 83814
5. Organized Under the Laws of: ID W 6113		6. Annual Report must be signed.* Signature: Tom Ellefson Name (type or print): Tom Ellefson Date: 04/19/2012 Title: President			
Processed 04/19/2012		* Electronically provided signatures are accepted as original signatures.			