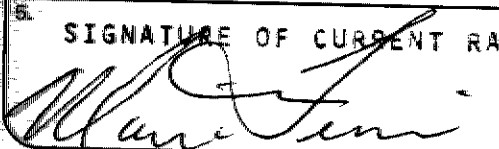


No. <u>W 903</u>	Annual Report Form Due No Later Than November 30, <u>1997</u>		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct <u>SHADY NOOK RESTAURANT, L.L.C</u> MICHAEL D MCLAIN <u>Marnie</u> <u>PO BOX 486</u> <u>Finnemore</u> <u>SALMON</u> <u>ID 83467</u>		MICHAEL D MCLAIN <u>HIGHWAY 93 N</u> <u>Marnie Finnemore</u> <u>SALMON</u> <u>ID 83467</u> 3. Organized Under the Laws of: <u>ID</u> <u>W</u> <u>963</u>													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☒ Managers or ☐ Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td><u>manager/</u> <u>owner</u></td> <td><u>Marnie Finnemore</u></td> <td><u>PO BOX 486</u></td> <td><u>Salmon</u></td> <td><u>Id</u></td> <td><u>83467</u></td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>manager/</u> <u>owner</u>	<u>Marnie Finnemore</u>	<u>PO BOX 486</u>	<u>Salmon</u>	<u>Id</u>	<u>83467</u>
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5. SIGNATURE OF CURRENT RA 		6. Signature <u>Marnie Finnemore</u> Date <u>10-20-97</u> Name (Typed or Printed) <u>Marnie Finnemore</u> Title <u>owner</u>														

ISSUED: 10-04-1997

↓ DO NOT TAPE OR STAPLE ↓

621