

No. W 16890		Due no later than Oct 31, 2009 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		1. Mailing Address: Correct in this box if needed. IDAHO & OREGON RIVER JOURNEYS, LLC ROBERT J. VOLPERT PO BOX 1415 SALMON ID 83467		M CHASE SLAVIN 116 N CENTER ST SALMON ID 83467			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ROBERT J VOLPERT	Street or PO Address 44 WAGON WHEEL		City SALMON	State ID	Country USA	Postal Code 83467
5. Organized Under the Laws of: ID W 16890		6. Annual Report must be signed.* Signature: Robert J.Volpert Name (type or print): Robert J.Volpert Date: 08/27/2009 Title: Managing Partner					
Processed 08/27/2009 * Electronically provided signatures are accepted as original signatures.							