No. W 86623 Return to:		Due no later than Sep 30, 2010 Annual Report Form		-	2. Registered Agent and Address (NO PO BOX) LISA JOLLEY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JOLIE ENTERPRISES, LLC 425 PINE POCATELLO ID 83201			425 PINE POCATELLO ID 83201 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	nies: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	LISA L (JOL	LEY_NAME)	425 W PINE		POCATELLO	ID	USA	83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Lisa Jolley			Date: 09/10/2010			
W 86623		Name (type or print): Lisa Jolley			Title: Manager			
Processed 09/10/2010 * Electronically provided signatures are accepted as original signatures.								