

No. W 31698	Due no later than Jul 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) CAL KEITH COPE 3110 E CLEVELAND BLVD B-1 CALDWELL ID 83605														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. VICTOR'S LLC ROBERT L WILLIAMSON 4309 WASHINGTON AVE. CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																	
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"> <input checked="" type="radio"/> Manager </td> <td style="width: 15%;"> <input type="radio"/> Member (circle one) </td> <td colspan="5"></td> </tr> </table>			<input checked="" type="radio"/> Manager	<input type="radio"/> Member (circle one)					
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 31698 </div>		6. <table border="0" style="width: 100%;"> <tr> <td style="width: 70%;"> Signature: <u>Robert L. Williamson</u> </td> <td style="width: 30%;"> Date: <u>5/13/11</u> </td> </tr> <tr> <td> Name (type or print): <u>Robert L. Williamson</u> </td> <td> Title: <u>OWNER</u> </td> </tr> </table>					Signature: <u>Robert L. Williamson</u>	Date: <u>5/13/11</u>	Name (type or print): <u>Robert L. Williamson</u>	Title: <u>OWNER</u>							
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