No. W 63075	Due no later than May 31, 2011	2. Registered Agent BOX)	and Office (NOT A P.O.
Return to:	Annual Report Form	CHARLES A BROWN	
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	324 MAIN ST	
450 N 4th STREET PO BOX 83720	MCKINLEY ENTERPRISES LLC	LEWISTON ID	83501
BOISE, ID 83720-0080	DO 701/ 4007	1	
,	PO BOX 1225	3. New Registered Age	ent Signature
NO FILING FEE IF	LEWISTON ID 83501	or Hell Registered Age	are signature.
RECEIVED BY DUE DATE			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manage <u>r or Me</u> mber Nam	ne Street or PO Address	City Stat	te Country Postal Code
Manager (Member (circle one)			
Jason L. McKinley, 609 Bryden Ave., Ste. B, Lewiston, ID USA 83501			
Karen McKinley, 609 Bryden Ave., Ste. B, Lewiston, ID USA 83501			
			·
Organized Under the Laws of	f: 6.	./	
TDALLO	Signature:	\mathcal{I}	Date:ろ /23/11
IDAHO	PIPPT	/	
W 63075	Name (type of print): Jason L. McKinle	≢ Υ	Title: Member
T 100 (00 (00 (1) 00 (1)			
Issued 03/23/2011 by PEH			128138

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered