

No. **W 56509**

Due no later than November 30, 2008

## Annual Report Form

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

AUTOSMITHS, LLC  
518 N 2600 E  
ST ANTHONY, ID 83445

2. Registered Agent and Office NO PO BOX

KEVIN NELSON  
518 N 2600 E  
ST ANTHONY, ID 83445NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	KEVIN NELSON	518 N 2600 E	ST ANTHONY	ID	83445
MEMBER	TAMARA NELSON	518 N 2600 E	ST. ANTHONY	ID	83445

5. Organized Under the Laws of:  
IDAHO  
W 56509

6.

Signature KEVIN NELSON Date 9/15/08Name (Typed or Printed) KEVIN NELSON Title MANAGER

Issued 09/02/2008

Do Not Tape or Staple

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