

No. W 5849

Due no later than March 31, 2009
Annual Report Form

2. Registered Agent and Office NO PO BOX

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

SMOKE INN, LLC
JAY LILES
3912 W. STATE ST
BOISE, ID 83703JAY K. LILES
3912 W. STATE ST
BOISE, ID 83703NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

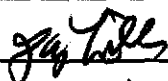
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Jay Liles	4810 N. Fortune #202	Boise	ID	83703

5. Organized Under the Laws of:

IDAHO
W 5849

6.

Signature



Date

3-25-09

Name (Typed or Printed)

Jay Liles

Title

Manager

Issued 01/05/2009

Do Not Tape or Staple

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