No. W 50146	Due no later than April 30, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	Mailing Address i Correct in this box, if applicable	MATTHEW MORGAN
700 WEST JEFFERSON	MORGAN 5 LIMITED LIABILITY COMPANY	1217 WEST CANFIELD AVE
PO BOX 83720	1217 WEST CANFIELD AVE	COEUR D ALENE, ID 83815
BOISE, ID 83720-0080	COEUR D ALENE, ID 83815	
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
	anies: Enter Names and Addresses of Members.	
Office held Name		· .
Member/Manager	Street or P.O. Address City	State Zip
Tina Morg	an 1217 W Canfield Ave Coe	IO 83815
i. Organized Under the Laws of:	6	
IDAHO W 50146	Signature June Mongo	Date _ 2/9/07
	Name Printed or Tina Morgan	Title Manager
Issued 02/01/2007	Do Not Tape or Staple	200704008693