




No. W 90924	Due no later than Feb 28, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ROB SIRI 200 W 8TH ST #2 KETCHUM ID 83340							
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. ROB'S SUN VALLEY SALSA COMPANY L.L.C. ROB SIRI PO BOX 3615 KETCHUM ID 83340		3. <u>New</u> Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions										
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code				
	ROBERT SIRI	P.O BOX 3615	KETCHUM	ID	USA	83340				
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 90924 </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="border-bottom: 1px solid black;">Signature: </td> <td style="border-bottom: 1px solid black; text-align: right;">Date: 3/7/11</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Name (type or print): ROBERT SIRI</td> <td style="border-bottom: 1px solid black; text-align: right;">Title: OWNER</td> </tr> </table>					Signature: 	Date: 3/7/11	Name (type or print): ROBERT SIRI	Title: OWNER
Signature: 	Date: 3/7/11									
Name (type or print): ROBERT SIRI	Title: OWNER									
Issued 02/23/2011 by LJM						123787				

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.