No. W 29875 Return to:		Due no later than Apr 30, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. SH, LLC KATHLEEN SPITZER PO BOX 828 VICTOR ID 83455		2	2. Registered Agent and Address (NO PO BOX) KATHLEEN SPITZER 9390 EDGEWOOD LANE VICTOR ID 83455 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nar	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	KATHLEEN SPITZER		PO BOX 828		VICTOR	ID	USA	83455
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 29875		Signature: Kathleen Spitzer			Date: 02/18/2011			
		Name (type or print): Kathleen Spitzer			Title: Member			
Processed 02/18/2011 * Electronically provided signatures are accepted as original signatures.								