No. W 85939		Due no later than Aug 31, 2012		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CONNIE MAGNUSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CC'S CATERING, LLC CONNIE MAGNUSON 1457 W STAFFORD DR EAGLE ID 83616		EAGLE ID	1457 W STAFFORD DR EAGLE ID 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CONNIE MAGNU		GNUSON	1457 W. STAFFORD DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Cor		Date: 09/12/2012				
W 85939		Name (type or	print): Connie Magnuson		Title: Manager			
Processed 09/12/2012 * Electronically provided signatures are accepted as original signatures.								