No. <b>W 63543</b>		Due no later than Jun 30, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  STAFFING COMPANY LLC (THE) 560 W KATHLEEN STE D COEUR D' ALENE ID 83815		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				CHERYL MURPHY 193 PEAK VIEW DR SAGLE ID 83860  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Mo	omher or Manager				
Office Held	Name	Street or P		City	State	Country	Postal Code
MEMBER CHERYL MUI		RPHY 193 PEAK \	/IEW DR	SAGLE	ID	USA	83860
5. Organized Under the Laws of:  ID  W 63543		6. Annual Report must be signed.*  Signature: Cheryl Murphy  Name (type or print): Cheryl Murphy		Date: 04/13/2009 Title: Owner			
Processed 04/13/2009 * Electronically provided signatures are accepted as original signatures.							