No.	W 74873	Due no later than 6/30/2009	2. Registered Agent and Address (NO PO BOX)		
	n to: SECRETARY OF STATE 450 NORTH FOURTH STREE PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF CEIVED BY DUE DATE	1036 E IRON EAGLE DR STE 105 Sig S Legal Documents to the color of the	FACIFIDANCIA SIC USAN DOCUM	unents, LCC	
	nited Liability Companies: Ent te Held Name	er Names and Addresses of at least one Member or Manage Street or PO Address	er. City State Zip		
Ma	uager Alton to	byser 126 E. US. HWY 2	6 Shoshine, ID 83752		
5. O	rganized Under the Laws of:	6. Annual Report must by signed.	Aug \$1, 6009		
	ID W 74873	Name(type or print):	Date: Aug \$1, 2009 Sch Title: Rec. Part Agent		
Iss	ued 8/26/2009 by DK1		200906008481	I	

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 addressmust be inside Block 1.
- **BLOCK 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**
- **BLOCK 3:** Only a **new** registered agent must sign in Block 3.
- **BLOCK 4:** Enter names and business addresses of president, secretary and directors (for corporations only), managers/members (for LLC's only), one or more general partners (for LP's only). **Note: Putting** "same as last year" or "same as above" or leaving the block blank will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.
- **BLOCK 5:** May not be altered through the use of this form.
- **BLOCK 6:** The annual report must be signed by a person authorized to represent the corporation/LLC/LP. Print or type the name and title of the signer below the signature.
 - ** The image of this form will be available on the Internet once it is filed. DO <u>NOT</u> enter Social Security

 Numbers.

If the (Corporation/Limited Liability Company/Limited Partnership) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost the the (Corporation/Limited Liability Company/Limited Partnership), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED