No. **W 95382**	**Due no later than Aug 31, 2012**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** SOWAMAKOLO, LLC PO BOX 386 TWIN FALLS ID 83303	LORI DONALDSON 3195 LONGBOW DRIVE TWIN FALLS ID 83301 3. New Registered Agent Signature:*

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	LORI DONALDSON	3195 LONGBOW DRIVE	TWIN FALLS	ID	USA	83301

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 95382**	Signature: Lori Donaldson	Date: 06/13/2012
	Name (type or print): Lori Donaldson	Title: Member

Processed 06/13/2012

* Electronically provided signatures are accepted as original signatures.