Issued 12/01/2008	Do Not Tape or Staple	200902008355
W 71007	Name (Typed or Alex Gome	Date 12/10/08  Title Managed member
5. Organized Under the Laws of: IDAHO	6. Signature Alex Mo	Date 12/10/08
Office held Name  Member Alex Gomes	es: Enter Names and Addresses of Members Street or P.O. Address  3240 € 3225 N TWI	ers. <u>City State Zip</u> in Falls ID 83301
NO FILING FEE IF RECEIVED BY DUE DATE	ion. Enter Nomes and Addresses of Nombo	
SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applied ALEX GOMES, LLC ALEX GOMES 3240 E 3225 N TWIN FALLS, ID 83301	3240 E 3225 N TWIN FALLS, ID 83301  3. New Registered Agent Signature
No. W 71007	Annual Report Form	4157 00150