No. W 71669	Annual Report Form  1. Mailing Address - Correct in this box, if applicable 722		2. Registered Agent and Office NO PO BOX WALTER D EDWARDS 7220 RIDGE VIEW DR MARSING, ID 83639		
Return to:					
SECRETARY OF STATE					
450 NORTH FOURTH STREET PO BOX 83720			MANGINO, ID 0000	ARGINO, ID 65009	
BOISE, ID 83720-0080	MARSING, ID 83639				
20,02, 12 00, 20 0000		3	. New Registered Ag	ent Signature	
NO FILING FEE IF				,	
RECEIVED BY DUE DATE			· <del></del> ···_		
<ol> <li>Limited Liability Companie</li> </ol>	es: Enter Names and Addresses of M	embers.			
Office held Name	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
MEMBER CAROLYN L EDW	ARDS 7220 RIDGE VEW DR.	MARSING	10	83639	
NEMIZER /ZEGISTERED WALTER	EDWARDS 7220 RIDGE VIEW DR	MARSING	ID	83439	
AGENT					
			the Victorian Control	* j *	
			100000		
				·	
5. Organized Under the Laws of:	6. 1/2/12 0	61.1 1	17	111/00	
IDAHO	Signature Males D.	William 2	Date	71100	
W 71669	Name Printed WALTER D. EDWARDS		Title REG. AGENT		
Issued 12/01/2008	<del></del>	Do Not Tape or Staple		200902008999	

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