

No. W 26852	Due no later than November 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable		JOLYN SEIBERT 160 W JEFFERSON BOISE, ID 83702 323 E. Riverside Dr. #220 Eagle, ID 83616		
NO FILING FEE IF RECEIVED BY DUE DATE			3. New Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u> Manager	<u>Name</u> Jolyn Seibert	<u>Street or P.O. Address</u> 323 E Riverside Dr. #220	<u>City</u> Eagle	<u>State</u> ID	<u>Zip</u> 83616
5. Organized Under the Laws of: IDAHO W 26852		6. Signature <u>Jolyn Seibert</u> Date <u>9/15/08</u> Name (Typed or Printed) <u>Jolyn Seibert</u> Title <u>Manager</u>			

Issued 09/02/2008

Do Not Tape or Staple

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