No. W 58312		Due no later than Jan 31, 2010		2.	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BAUMAN BAILEY CONSULTING, LLC MICHAEL NOGLE 2411 SUNSET AVE BOISE ID 83702			MICHAEL NOGLE 2411 SUNSET AVE BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Na	mes and Addresses of a	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	MANAGER MICHAEL NO		1535 EUCLID AVE		BOISE	ID	USA	83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Michael Nogle			Date: 12/22/2009			
W 58312		Name (type or print): Michael Nogle			Title: Manager			
Processed 12/22/2009 * Electronically provided signatures are accepted as original signatures.								