No. W 21321		ue no later than Nov 30, 2009	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form	to consider the second second second	PHILIP HAWKINS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	HAWKINS NW JENNIFER A		1810 E SCHNEIDMILLER AVE #240 POST FALLS ID 83854				
	POST FALLS	POST FALLS ID 83854		3. New Registered Agent Signature:*			
NO FILING FEE IF USA RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JENNIFER	HAWKINS	1810 E SCHNEIDMILLER AVE #240	POST FALLS	ID	USA	83854	
MANAGER PHILIP HAWKINS		1810 E SCHNEIDMILLER AVE #240	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: 6. Annual Repo		t must be signed.*					
ID	Signature: Ph	Signature: Philip W. Hawkins Date: 09/29/2009					
W 21321	Name (type o	Name (type or print): Philip W. Hawkins		Title: Manager			
Processed 09/29/2009	* Electronically provided signatures are accepted as original signatures.						