No. W 17958	Due no later than Feb 28, 2003	Registered Agent and Office NO PO BOX
	Annual Report Form	JAMES FLOCCHINI
Return to: SECRETARY OF STATE	<ol> <li>Mailing Address - Correct in this box, if applicable</li> </ol>	RT 1 BOX 172
700 WEST JEFFERSON	TWO RAVENS HERBALS, LLC	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
PO BOX 83720		KOOSKIA, ID 83539
BOISE, ID 83720-0080	RT 1 BOX 172	3. New Registered Agent Signature
	KOOSKIA, ID 83539	0. 1.51.
NO FILING FEE IF		
RECEIVED BY DUE DATE	anies: Enter Names and Addresses of Members.	
4. Limited Liability Compa	anies: Enter Names and Address City	v S <u>tate Zip</u>
Office held Name		
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James +	Localini Kili Walle	TD 83539
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5. Organized Under the Laws of:	6.	- 1/2/03
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W 17958	Name Printed) James Flocching	
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