

No. W 20619		Due no later than Sep 30, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HALLMEN, LLC DAVID HALLMEN 3026 E. SHADOWWOLF DR. EAGLE ID 83616		DAVID HALLMEN 3026 E SHADOWWOLF DR EAGLE ID 83616			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name DAVID HALLMEN	Street or PO Address 3026 E. SHADOWWOLF DR.		City EAGLE	State ID	Country USA	Postal Code 83636
5. Organized Under the Laws of: ID W 20619		6. Annual Report must be signed.* Signature: David Hallmen Name (type or print): David Hallmen Date: 09/30/2009 Title: Manager					
Processed 09/30/2009 * Electronically provided signatures are accepted as original signatures.							