No. W 15061		Due no later than Apr 30, 2011		2	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			SHAWNA HOLST 10126 N YELLOWSTONE IDAHO FALLS ID 83401 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HOLST WRECKING LAND, LLC SHAUNA HOLST PO BOX 486 UCON ID 83454 USA		_					
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses of a	t least one Member or Manager.						
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
MANAGER	JON SCOTT	HOLST	PO BOX 126		UCON	ID	USA	83454	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID W 15061		Signature: Shauna L Holst			Date: 04/13/2011				
		Name (type or print): Shauna L Holst			Title: Member				
Processed 04/13/2011	rocessed 04/13/2011 * Electronically provided signatures are accepted as original signatures.								