		Du.		teport Form	2. deg ت الو 1	istered Agent	and Office N	OT A P.O. BO
Return to: SECRETARY OF STATE		Day to Eater than November 30,						
		1. Mailing Address - Please Correct, If Not Correct				115 E MAIN		
700 WEST JEFFERSO PO BOX 83720	NC NC	GRAYHAW	K LEAS	ING, L.L.C.				
30(SE, ID 83720-008)	n	DALE	THOMSU	:N		XSURG	7	5 07/4
		115 W M				ASURG	1	D 8344
NO FEE REQUIRED		PO BOX 609			3. Org	3. Organized Under the Laws of:		
* FIRST NOTICE *		I				garmed Gridel (ric Edws Of,		
		NE ABURG		ID 8344	i U	ΙD	W	2228
Limited Liability Co.	manies and E	Susiness Address	s of Presid	ent, Secretary and D	irectors			·
Limited Liability Co.	mpames. Ente	r Names and Add	tresses of I	☑ Managers or	Members (check	one)		
Office held	<u>Name</u>		Street o	r P.O. Address			_	
Manager	Dale D	Thomson		" 	Ē	ity	<u>State</u>	<u>Zīp</u>
	Date 1	THOMSOIL	P.O.	Box 609	Rexb	urg	ID	83440
Manager	Tana Th	Offician	T-1					
	Idiid II.	IONISON	P.Q.	Box 609	Rexb	ara	ID	83440
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		3	griature _			Date	7. 21.	78
		Na	me (Typed or	Dale P. Thom	ropi	7.5		
reenen r			me (Typed or Printed)	Dale P. Thom	ison	_ Title <u>M</u>	anager	4-
ISSUED: 0	77-03-19	98				Title _M	_	*
ISSUED: (7-03-19				APLE)	Title _M	anager 803	*
ISSUED: (77-03-19	98				_ Title _M	_	
ISSUED: (07-03-19	98				_ Title <u>M</u>	_	
ISSUED: (77-03-19	98				_ Title _M	_	