No. W 59463		Due no later than Feb 28, 2011	2. Registered Agent and Address (NO PO BOX) KEVIN ORTON 256 W 3RD # E 33 BURLEY ID 83318 3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MONSTER 4X4 PERFORMANCE, LLC KEVIN L ORTON 256 W 3RD #E33 BURLEY ID 83318				
NO FILING FEE IF RECEIVED BY DUE DATE		USA				
4. Limited Liability Cor	mpanies: Enter Nan	nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER KEVIN ORTO		N 557 BURTON AVE #1	BURLEY	ID	USA	83318
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID W 59463		Signature: Kevin Orton	Date: 01/03/2011			
		Name (type or print): Kevin Orton	Title: Manager			
Processed 01/03/2011 * Electronically provided signatures are accepted as original signatures.						