| o. W 2620 | | i al Report Form iter Than November 30, | ן לאלו | | ent and Office No. | RTS OF BUR |
|--|-------------------------|---|--------------|------------------|----------------------------------|--------------|
| etum to: SECRETARY OF STATE | 1 Mailing Address - Ple | ase Correct, If Not Correct | | 402 6TH | | K 1 3 01 201 |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | PARTS OF TWI | N FA | RUPERT | | D 83350 |
| NO FEE REQUIRED | 402 6TH ST | | | 3. Organized Uno | der the Laws of: | |
| * FIRST NOTICE * | RUPERT | ID 8335 | a l | 10 | ₩ | 2620 |
| Corporations: Enter Names and | | | | к 1 I | | |
| Limited Liability Companies: Ent | | - | Members | | | |
| Office held Name | | reet or P.O. Address | | City | <u>State</u> | Zip |
| Manager Michael | K. Wood 132 | 1 Maple Ave. | Twir | r falls | Idaho | 83301 |
| | | | | | | |
| Signature of New Registered | Signat | Bilme 10 | Hink | leblok | 11-29-9 | 9 |
| Signature of New Registered | Signat | Typed or Wilma M. Win | Minkle blace | Lebenta Tije | 11-29-9 Sec/ Tre | |
| Signature of New Registered | Signat Name | Typed or Wilma M. Wil | Minkle blace | Leblook | 11-29-9 Sec/ Tre jority Me | |