No. W 2143		Due no later than Feb 29, 2012		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. L. NEWMAN, L.C. L LAVAR NEWMAN 2943 N 800 E MONTEVIEW ID 83435		2943 NORTH MONTEVIEW	L LAVAR NEWMAN 2943 NORTH 800 EAST MONTEVIEW ID 83435 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Na		mas and Addresse	s of at least one Member or Manager					
Office Held	Name	ines and Addresse	Street or PO Address	City	State	Country	Postal Code	
MANAGER	L LAVAR N	EWMAN	2941 N 800 E	MONTEVIEW	ID	USA	83435	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: L La		Date: 01/04/2012				
W 2143		Name (type or		Title: Partner				
Processed 01/04/2012 * Electronically provided signatures are accepted as original signatures.								