No. W 83954		Due no later than May 31, 2011	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. BE SELF-RELIANT, LLC DAVID NOACK 336 N 1810 E ST ANTHONY ID 83445	DAVID NOACK 336 N 1810 E ST ANTHONY ID 83445 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Compa	nies: Enter Nam	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	DAVID NOAC	K 336 N. 1810 E.	ST. ANTHONY	ID	USA	83445	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 83954		Signature: David Noack	Date: 03/18/2011				
		Name (type or print): David Noack	Title: Manager				
Processed 03/18/2011	Processed 03/18/2011 * Electronically provided signatures are accepted as original signatures.						