No. W 86163 Return to:		Due no later than Aug 31, 2011 Annual Report Form]	2. Registered Agent and Address (NO PO BOX) STEPHEN T SHERER 730 N MAIN ST MERIDIAN ID 83642 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed OLIVESURE, LLC ROY L PHILLIPS 987 E KINGSFORD DR MERIDIAN ID 83642						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address		City	State	Country	Postal Code	
MANAGER ROY L PHILLI		LIPS 987 E KINGSFORD DR		MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Roy L Phillips		Date: 09/08/2011				
W 86163		Name (type or print): Roy L Phillips		Title: Manager				
Processed 09/08/2011	rocessed 09/08/2011 * Electronically provided signatures are accepted as original signatures.							