

No. W 50118		Due no later than May 31, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. AFFILIATED INCIDENT SOLUTIONS L.L.C. JOHN A ZROFSKY PO BOX 236 MELBA ID 83641		JOHN A ZROFSKY 10952 MAP ROCK RD MELBA ID 83641			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name JOHN A ZROFSKY	Street or PO Address 10952 MAP ROCK RD		City MELBA	State ID	Country USA	Postal Code 83641
5. Organized Under the Laws of: ID W 50118		6. Annual Report must be signed.* Signature: John Zrofsky Name (type or print): John Zrofsky Date: 03/19/2010 Title: Member					
Processed 03/19/2010 * Electronically provided signatures are accepted as original signatures.							