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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------------|---------------------|
| No. <b>W 35816</b>                                                                                                                                     |              | <b>Due no later than Jan 31, 2009</b>                                                                                                                                                          |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>                  |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BACKATCHA, LLC<br>ZANE L BUFFI<br>RT 2 BOX 23<br>RESERVATION RD<br>POCATELLO ID 83202<br>USA |           | ZANE L BUFFI<br>RT 2 BOX 23<br>RESERVATION RD<br>POCATELLO ID 83202 |                     |
|                                                                                                                                                        |              |                                                                                                                                                                                                |           | 3. <u>New</u> Registered Agent Signature:*                          |                     |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |              |                                                                                                                                                                                                |           |                                                                     |                     |
| Office Held                                                                                                                                            | Name         | Street or PO Address                                                                                                                                                                           | City      | State                                                               | Country Postal Code |
| MEMBER                                                                                                                                                 | ZANE L BUFFI | RT 2 BOX 23 RESERVATION RD                                                                                                                                                                     | POCATELLO | ID                                                                  | USA 83202           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 35816</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Zane L Buffi<br>Name (type or print): Zane L Buffi<br>Date: 01/13/2009<br>Title: Member                                                        |           |                                                                     |                     |
| Processed 01/13/2009                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                                                      |           |                                                                     |                     |