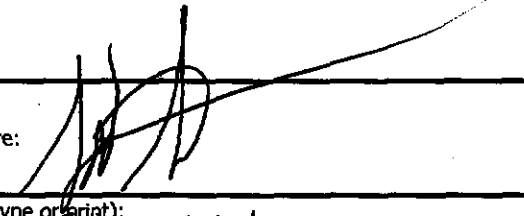


No. W 19735	Due no later than Jun 30, 2012 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) TODD SUTPHEN 6711 SAXTON AVE BOISE ID 83703
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HAIREM, LLC (THE) 6711 SAXTON AVE BOISE ID 83714		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Todd S Sutphen 6711 Saxton Ave Boise ID USA 83714		
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 19735 </div>		6. Signature:  <hr/> Name (type or print): <u>Todd S Sutphen</u> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <u>5/12/12</u> <hr/> Title: <u>Manager</u> </div> </div>	

Issued 04/26/2012 by KAH

118877

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM