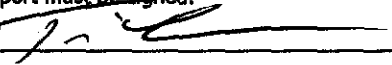


No. <b>W 60331</b>	<b>Due no later than 3/31/2009 Annual Report Form</b>		2. Registered Agent and Address (NO PO BOX)		
Return to:  SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address: Correct in this box if needed.  INDIMEDIA, LLC <del>1508 EUCLID #101</del> Box <del>1226</del> 1226 <del>BOISE ID 83706</del> Boise, ID 83701		TRAVIS E GALLOWAY <del>1508 EUCLID #101</del> 5632 S. Basalt Ave <del>BOISE ID 83702</del> Boise, ID 83716		
			3. New 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	Zip
Manager	TRAVIS GALLOWAY	Box 2273	Boise	ID	83701
5. Organized Under the Laws of:  <b>ID W 60331</b>		6. Annual Report must be signed.  Signature:  Date: 2/2/09  Name(type or print): TRAVIS GALLOWAY Title:			