


No. W 79059	Due no later than Nov 30, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JOHN P MIX 676 PULLMAN RD NO 359 233 SO CLEVELAND ST. #0 MOSCOW ID 83843			
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. FAMILY NUTRITION ENTERPRISE, LLC JOHN P MIX 676 PULLMAN RD NO 359 233 So. Cleveland St #0 MOSCOW ID 83843 USA		3. <u>New</u> Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	JOHN P MIX	233 So. Cleveland St #0	MOSCOW ID	USA	83843	
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 79059 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): JOHN P. MIX </div> <div style="width: 35%;"> Date: 1/15/2011 <hr/> Title: Manager </div> </div>				
Issued 12/17/2010 by LJM <div style="float: right;">106509</div>						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM