No. W 106434		Due no later than Sep 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 PO E TWI		Annual Report Form 1. Mailing Address: Correct in this box if needed. HOLMSTEAD HOWE, PLLC SHAWNA HOWE PO BOX 1293 TWIN FALLS ID 83303-1293		SHAWNA M HOWE 457 BLUE LAKES BLVD S TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
200	Names and Addre	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER SHAWNA MEMBER MARK H	HOWE DLMSTEAD	PO BOX 1293 PO BOX 1293	TWIN FALLS TWIN FALLS	ID ID	USA USA	83303-1293 83303-1293	
E Organized Under the Laws of	6 Appual Bor	port muct be cianed *					
		nnual Report must be signed.*					
		ture: Shawna Howe Date: 07/29/2013					
W 106434	Name (type	Name (type or print): Shawna Howe		Title: Member			
Processed 07/29/2013	* Electronicall	* Electronically provided signatures are accepted as original signatures.					