No. W 50647			Due no later than May 31, 2010		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			ROBERT KARL ERLACHER				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		ERLACHER AND E ROBERT KARL E PO BOX 508	1. Mailing Address: Correct in this box if needed. ERLACHER AND ERLACHER LLC ROBERT KARL ERLACHER PO BOX 508 DRIGGS ID 83422		20 CEDRON ROAD, SUITE 203 VICTOR ID 83455 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Compa	nies: Enter	Names and Addresses of	f at least one Member or Manager.						
Office Held	Name		Street or PO Address	City	State	Country	Postal Code		
MEMBER	ROBERT	KARL ERLACHER	PO BOX 508	DRIGGS	ID	USA	83422		
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Rober	Signature: Robert K Erlacher		Date: 05/24/2010				
W 50647		Name (type or pr	Name (type or print): Robert K Erlacher			Title: Member			
Processed 05/24/2010 * Electronically provided signatures are accepted as original signatures.									