No. W 93408	Due no later than May 31, 2011		2. Registered Agent and Office (NOT A P.O. BOX)  ROBERT LOUIS LAVALA			
	Annual Report Form	BOX)				
Return to:	Annual Report Form	ROBER				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed	d.   219 ZI	219 ZIMMERMAN RD			
450 N 4th STREET	NO BOUNDARYS LLC	MOYIE	MOYIE SPRINGS ID 83845			
PO BOX 83720						
BOISE, ID 83720-0080	219 ZIMMERMAN RD	<del></del> -				
1	MOYIE SPRINGS ID 83845	S ID 83845 3. New Registered Agen		t Signature.		
NO FILING FEE IF	110/12 01/01/00 15					
RECEIVED BY DUE						
DATE						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager or Member Nan	ne Street or PO Address	City	State	Country	Postal Code	
Manager Member (circle one)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,	,,,,,,	
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Robert Louis Lavala						
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219 Zimnerman Rd, Moyie Springs, 10 USA 83845						
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5. Organized Under the Laws	of: 6.	>			1 ,	
ľ	Signature:	<del></del>		Date:	3/22/11	
l IDAHO					3/20/11	
W 93408	Name (type or print):	J- 1 1	. 1 .	Title: A	owner	
סטדכב אי	Locet	+ L. Law			XVNEL	
Issued 03/17/2011 by KAH				<del></del>	113658	
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be