No. <b>W 71539</b>		Due no later than Feb 28, 2014  Annual Report Form		2.	Registered Agent and Address (NO PO BOX)     CHRISTINE SLATER			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CDP ENTERPRISES, LLC  CHRISTINE M SLATER  110 W. MORTON ST.  MOSCOW ID 83843			110 W. MORTON ST. MOSCOW ID 83843  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	oanies: Enter Nai	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address	(	City	State	Country	Postal Code
MANAGER CHRISTINE S		SLATER	110 W. MORTON ST.	N	10SCOW	ID	USA	83843
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 71539		Signature: Christine Slater			Date: 02/28/2014			
		Name (type or print): Christine Slater			Title: Manager			
Processed 02/28/2014 * Electronically provided signatures are accepted as original signatures.								