

No. W 32810	Due no later than August 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX PATRICIA LETELIER 5124 REDBRIDGE DR BOISE, ID 83709													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable 3655 LLC 5124 REDBRIDGE DR ^{W.} 1770 State St. BOISE, ID 83709 #147 83702		3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Members.																
<table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>member</td> <td>Patricia Letelier</td> <td>5124 Redbridge Dr.</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	member	Patricia Letelier	5124 Redbridge Dr.	Boise	ID	83703
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
member	Patricia Letelier	5124 Redbridge Dr.	Boise	ID	83703											
5. Organized Under the Laws of: IDAHO W 32810		6. Signature <u>Patricia Letelier</u> Date <u>6/13/05</u> Name <small>(Typed or Printed)</small> <u>Patricia Letelier</u> Title <u>member</u>														