No. <b>W 42397</b>		Due no later than Aug 31, 2012 Annual Report Form		2. I	2. Registered Agent and Address (NO PO BOX)  SCOTT EDWIN SCHLOFMAN 11333 W CAMAS ST BOISE ID 83709  3. New Registered Agent Signature:*			
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 needed.  SCOVE, LLC  SCOTT E SCHLOFMAN  11333 W CAMAS ST  BOISE ID 83709						
				3. 1				
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	Ci	ity	State	Country	Postal Code
MEMBER MEMBER			11333 W CAMAS ST 11333 W CAMAS ST		DISE DISE	ID ID	USA USA	83709 83709
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 42397		Signature: Scott E. Schlofman			Date: 08/23/2012			
		Name (type or print): Scott E. Schlofman			Title: Member			
Processed 08/23/2012 * Electronically provided signatures are accepted as original signatures.								