No. W 18664	Due no later than Apr 30, 2013	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form	JOHN JEFIMOFF				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		1160 SAGE DR POCATELLO ID 83204			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JEFIMOFF ASSOCIATES, L.L.C. JOHN JEFIMOFF 1160 SAGE DR	POCATELLO ID 63204				
	POCATELLO ID 83204	ELLO ID 83204 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA					
4. Limited Liability Companies: Enter N	ames and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER JOHN JEFI		POCATELLO	ID	USA	83204	
MANAGER GERDA JEI	TIMOFF 1160 SAGE DR	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: John Jefimoff	Date: 02/14/2013				
W 18664	Name (type or print): John Jefimoff	Title: M	Title: Managing Member			
Processed 02/14/2013	* Electronically provided signatures are accepted as original signatures.					