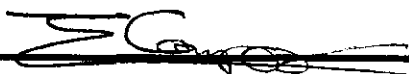
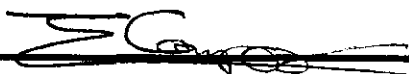
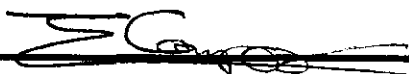


No. <b>W 72194</b>	Due no later than Mar 31, 2011 <b>Annual Report Form</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) ED CAMPOS 969 HORSE LN LEWISTON ID 83501					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> TAMMANY CREEK BOARDING KENNEL, LLC  969 HORSE LANE LEWISTON ID 83501		3. <u>New</u> Registered Agent Signature.					
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions</b>								
Manager or Member	Name	Street or PO Address	City	State Country Postal Code				
	Ed Campos	969 HORSE LANE	LEWISTON	ID NEVADA 83501				
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 72194</div>		6. <table style="width: 100%; border: none;"> <tr> <td style="border: none;">Signature: </td> <td style="border: none; text-align: right;">Date: 3-8-11</td> </tr> <tr> <td style="border: none;">Name (type or print): ED CAMPOS</td> <td style="border: none; text-align: right;">Title: OWNER</td> </tr> </table>			Signature: 	Date: 3-8-11	Name (type or print): ED CAMPOS	Title: OWNER
Signature: 	Date: 3-8-11							
Name (type or print): ED CAMPOS	Title: OWNER							
Issued 03/01/2011 by SLD <span style="float: right;">117836</span>								

### 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 inside Block 1.