	The first of the second of the	The state of the s
No. W 55364	Due no later than October 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable	SARAH SCHLESINGER 2212 S CROSSCREEK LN BOISE, ID 83706
NO FILING FEE IF RECEIVED BY DUE DATE	s Digital Commencer	3. New Registered Agent Signature
Office held Name	nies: Enter Names and Addresses of Managers. Street or P.O. Address	Y <u>State</u> Zip
Manager Sarah Se	thleswer 2212 Crosscieck in B	oise ID 85706
F Organization that I am at		
5. Organized Under the Laws of: IDAHO W 55364	Signature S. Salum Name (Typed or Salah Schlesing	Date 9-28-08 Title President
Issued 08/06/2008	Do Not Tape or Staple	200810006531