

No. W 7067		Due no later than Oct 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL KAUFMAN 2985 MAYFAIR RIDGE 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. Mailing Address: Correct in this box if needed. FELSTED-BROEMMELING, L.L.C.  2985 MAYFAIR RIDGE LEWISTON ID 83501		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. Office Held      Name      Street or PO Address      City      State      Country      Postal Code  <i>MANAGER MICHAEL KAUFMAN 2985 MAYFAIR RIDGE LEWISTON ID 83501</i>					
5. Organized Under the Laws of:  IDAHO W 7067		6. Signature: <u>Michael Kaufman</u> Date: <u>9-23-10</u> Name (type or print): <u>MICHAEL KAUFMAN</u> Title: <u>MANAGER</u>			
Issued 08/30/2010 by SLD      104335					

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**