

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 NO FILING FEE IF RECEIVED BY DUE DATE	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 MANAGER MICHAEL KAUFMAN 2985 MAYFAIR RIDGE LEWISTON ID IDA 83501				
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