No. <b>W 90607</b>		Due no later than Feb 29, 2012			2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  KEYES TO SAFETY, LLC  AARON J KEYES  3548B E 4000 N  KIMBERLY ID 83341			CHRISTINA KEYES 3548C E 4000 N KIMBERLY ID 83341  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	Manager Aaron J Keyes		3548B E 4000 N		KIMBERY	ID	USA	83341
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 90607		Signature: Christina Keyes			Date: 01/02/2012			
		Name (type or print): Christina Keyes			Title: Manager			
Processed 01/02/2012 * Electronically provided signatures are accepted as original signatures.								