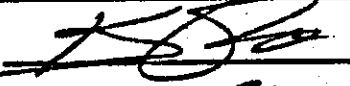


No. W 46228	Due no later than January 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable: HELP FUND 3, LLC PO BOX 1369 EAGLE, ID 83616		KELLY SHAW 2545 N CONSTANCE PL EAGLE, ID 83616												
			3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>HELP FUND 3, LLC</td> <td>P.O. Box 1369</td> <td>EAGLE</td> <td>ID</td> <td>83616</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	MANAGER	HELP FUND 3, LLC	P.O. Box 1369	EAGLE	ID	83616
Office held	Name	Street or P.O. Address	City	State	Zip										
MANAGER	HELP FUND 3, LLC	P.O. Box 1369	EAGLE	ID	83616										
5. Organized Under the Laws of: IDAHO W 46228	6. Signature  Date 11/6/06 Name (Typed or Printed) KELLY SHAW Title MANAGER														

Issued 11/01/2006

Do Not Tape or Staple

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