No. <b>W 59048</b>			Due no later than Feb 29, 2012	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		CC2, LLC CHRIS T, 366 SE 4	Annual Report Form  1. Mailing Address: Correct in this box if needed.  CC2, LLC CHRIS TAYLOR 366 SE 44TH AVE PORTLAND OR 97215		KELLY MILLER 18462 SAND HOLLOW RD CALDWELL ID 83607  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		Names and Add	resses of at least one Member or Manager.					
Office Held	Name	rames and radi	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CHRIS T	AYLOR	366 SE 44TH AVE	PORTLAND	OR	USA	97215	
5. Organized Under the Laws of:  ID  W 59048		Signature	6. Annual Report must be signed.*  Signature: Chris Taylor  Name (type or print): Chris Taylor  Title: Member					
Processed 12/23/2011	* Electronically provided signatures are accepted as original signatures.							