

No. W 92585	Due no later than Apr 30, 2011 Annual Report Form		2. Registered Agent and Address (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 needed. TOM CZARNIECKI, CPA, PLLC THOMAS CZARNIECKI 12343 W DALRYMPLE BOISE ID 83709		THOMAS CZARNIECKI 12343 W DALRYMPLE BOISE ID 83709			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	THOMAS JOHN CZARNIECKI	12343 W. DALRYMPLE	BOISE	ID	USA	83709
5. Organized Under the Laws of: ID W 92585	6. Annual Report must be signed.* Signature: Tom Czarniecki Name (type or print): Tom Czarniecki		Date: 03/31/2011 Title: Manager			
Processed 03/31/2011		* Electronically provided signatures are accepted as original signatures.				