No. W 44154	Due no later th	2. Registered Agent and Office (NOT A P.O. BOX)					
Return to:	Annual Report Form  1. Mailing Address: Correct in this box if needed. STAPLES LIMITED LIABILITY COMPANY  4044 MOUNTAIN LOOP POCATELLO ID 83204 USA		1 1	KEITH STAPLES			
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies	s: Enter Names and Addresses of	Managers OR Members.	<del></del>				
Manager/Member Nam	ie S	treet or PO Address	City	State	Country	Postal Code	
Keith ST	wples 4044	MT Soop	Poc,	Id.	u.5.	83204	
*			·				
5. Organized Under the Laws		in Sta Keith Sta	nles		Date:	nhalio	
W 44154	Name (type or print):	Keith STay	oles		Title:	wasor	
Issued 11/10/2010 by KAH		·	- 12			105848	
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure faiture mailings.