No. W 64754	Due no later than 7/31/2009	Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed.	LISA JENNINGS 1325 WALLEN RD MOSCOW ID 83843 1418 W. Carnel Back Ln # 219 Poise, ID 83702-6587 3. New Registered Agent Signature:
450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	GREEN FERN DESIGN, LLC PO-DOX 8564 MOSCOW ID 83843	
4. Limited Liability Companies: Ente Office Held Name	er Names and Addresses of at least one Member or Manage Street or PO Address	r. City State Zip
Masidaust Manager Lisa Jev	inings 1418 w. carrel Back In ‡	# 219 Baise ID 83702
	and the second s	المالية
5. Organized Under the Laws of: ID W 64754	6. Annual Report/must be signed. Signature: Way Semming. Name(type or print): LISA Jenning.	Date: Aug-06-2009 Title: Mana aev
	Transcuspe of princy.	200907007552