FILED E. FECTIVE

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: 1000 to 1000	File Number: W43199
STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS	
(see reverse for instructions)	
The entity identified below submits to the Secretary of State the following statement for the purpose of changing its business mailing address.	
1. The name of the business entity is:	A CAB, LLC
The business mailing address is currently on file as:	
140 G FLOWER DRIVE KETCHUM, ID 83340	
The business mailing address is to be changed to: PO BOX 1050 KETCHUM, ID 83340	
4. Change of address is effective: Upon Receipt OR Signed: Frulenick Bruke	(Date)
Printed Name: FREDERICK M. BURKE	
Capacity:	
g:\corp\forms\miscforms\change_address.pmd FILE ONE COPY	NO FEE REQUIRED