

No. W 35456 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Dec 31, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. ARD^COR, LLC 119 N 2400 E ST ANTHONY ID 83445	2. Registered Agent and Office (NOT A P.O. BOX) JAY ARD 119 N 2400 E ST ANTHONY ID 83445										
3. <u>New</u> Registered Agent Signature.												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.												
Office Held <i>Owner</i> <i>Manager</i>	Name <i>Jay Dee Ard</i>	<table border="1"> <thead> <tr> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td><i>119 N 2400 E</i></td> <td><i>St. Anthony Id.</i></td> <td></td> <td></td> <td><i>83445</i></td> </tr> </tbody> </table>	Street or PO Address	City	State	Country	Postal Code	<i>119 N 2400 E</i>	<i>St. Anthony Id.</i>			<i>83445</i>
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5. Organized Under the Laws of: IDAHO W 35456	6. <table border="1"> <tr> <td>Signature: <i>[Signature]</i></td> <td>Date: <i>1/2/10</i></td> </tr> <tr> <td>Name (type or print): <i>Jay Dee Ard</i></td> <td>Title: <i>Owner</i></td> </tr> </table>		Signature: <i>[Signature]</i>	Date: <i>1/2/10</i>	Name (type or print): <i>Jay Dee Ard</i>	Title: <i>Owner</i>						
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