

No. W 62312	Due no later than May 31, 2012 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. SYMAN, LLC TAMARA SIMPSON 1648 E PLAZA LOOP NAMPA ID 83687 USA		KAY LYMAN 6170 SE 4TH AVE NEW PLYMOUTH ID 83655			
			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	KAY LYMAN	6170 SE 4TH AVE	NEW PLYMOUTH	ID	USA	83655
MANAGER	TAMARA SIMPSON	26895 WAGNER RD	CALDWELL	ID	USA	83607
5. Organized Under the Laws of: ID W 62312	6. Annual Report must be signed.* Signature: Tamara Simpson Name (type or print): Tamara Simpson		Date: 03/13/2012 Title: Owner			
Processed 03/13/2012		* Electronically provided signatures are accepted as original signatures.				