No. <b>W 54997</b>		Due no later than Oct 31, 2009 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		ss: Correct in this box if needed LLC	4116 N ETT MERIDIAN	MICHAEL J MOIR 4116 N ETTARO AVE MERIDIAN ID 83646  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addresses of a	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
I MEMBER	J ROBYN M MOIR AS S OF THE MOIR FAMILY	4116 N ETTARO AVE	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: 6. Annual Report must		t be signed.*					
ID Signature: Michael M		Moir		Date: 09/04/2009			
W 54997	Name (type or print	Name (type or print): Michael Moir		Title: Member			
Processed 09/04/2009	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					