No. **W 41243**	**Due no later than Jul 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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** ROGGENKAMP CONSULTING, LLC SUZAN ROGGENKAMP CAIN 1770 W STATE ST 348 BOISE ID 83702	IDAHO SERVICE COMPANY 101 S CAPITOL BLVD 10TH FLOOR BOISE ID 83702 USA 3. New 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	SUAZAN A ROGGENKAMP CAIN	20 MOUNTAIN TOP RD	GARDEN VALLEY	ID	USA	83622

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 41243**	Signature: Suzan Roggenkamp Cain	Date: 08/17/2009
	Name (type or print): Suzan Roggenkamp Cain	Title: Managing Member

Processed 08/17/2009

* Electronically provided signatures are accepted as original signatures.