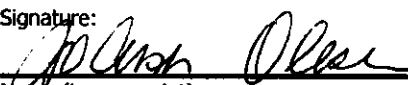
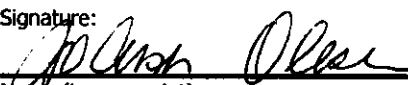
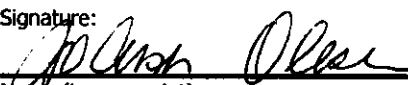


No. W 56139	Due no later than Nov 30, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JOANN OLESEN 2050 S 1000 E DRIGGS ID 83422							
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. NORTH END BAR & GRILL, LLC PO BOX 360 DRIGGS ID 83422		3. <u>New</u> Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.										
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JOANN Olesen	P.O. Box 360	Driggs Id.	USA	83422					
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Lupcho Baloski	8311 Victoria Woods Place	Fort Wayne	IN,	USA	46825				
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
5. Organized Under the Laws of: <div style="text-align: center; font-size: large;"> IDAHO W 56139 </div>		6. <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> Signature:  Name (type or print): JoAnn Olesen </td> <td style="width: 40%;"> Date: 10-7-13 Title: member </td> </tr> </table>		Signature:  Name (type or print): JoAnn Olesen	Date: 10-7-13 Title: member					
Signature:  Name (type or print): JoAnn Olesen	Date: 10-7-13 Title: member									

Issued 10/02/2013 by KAH

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM