No. W 43122	Due no later than Sep 30, 2010		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. DAVID HEFFERNAN INSURANCE LLC DAVID HEFFERNAN 3791 N LEGACY COMMON AVE		100 W OVER MERIDIAN II	DAVID HEFFERNAN 100 W OVERLAND RD STE 204 MERIDIAN ID 83642 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	MERIDIAN ID		3. <u>New</u> Register	ed Agent Si	gnature:		
4. Limited Liability Companies: Enter No. Office Held Name	ames and Address	es of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MANAGER DAVID HEFFERNAN		3791 N LEGACY COMMON AVE	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:	anized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: Da	Date:	Date: 07/12/2010				
W 43122	Name (type o	or print): David Heffernan	Title: Managing Member				
Processed 07/12/2010	* Electronically provided signatures are accepted as original signatures.						