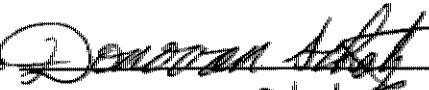
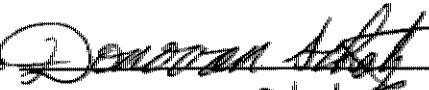
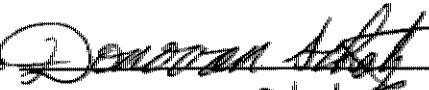


No. W 435	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: * SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		TOM RUSSELL 2005 E TROLLEY BOISE ID 83712													
	PLANT ASSETS LIMITED LIABILITY TOM RUSSELL 1813 N. 43TH 5429 Hill Rd. BOISE ID 83703		3. Organized Under the Laws of: ID W 435													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one) <table border="0"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>DONOVAN SCHATZ</td> <td>5429 HILL RD</td> <td>BOISE</td> <td>ID</td> <td>83703</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip		DONOVAN SCHATZ	5429 HILL RD	BOISE	ID	83703
Office held	Name	Street or P.O. Address	City	State	Zip											
	DONOVAN SCHATZ	5429 HILL RD	BOISE	ID	83703											
5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>10-26-99</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>DONOVAN SCHATZ</td> <td>Title</td> <td>Owner</td> </tr> </table>			Signature		Date	10-26-99	Name (Typed or Printed)	DONOVAN SCHATZ	Title	Owner				
Signature		Date	10-26-99													
Name (Typed or Printed)	DONOVAN SCHATZ	Title	Owner													

ISSUED: 07-03-1999

5477