

No. W 76495	Due no later than Jul 31, 2012 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ROBIN C MONROE 1760 W STATE ST BOISE ID 83702
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. ROBIN C. MONROE, LLC 1760 W STATE ST BOISE ID 83702		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Robin C. Monroe, LLC	1760 W State St	Boise	Id.	USA	83702
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 76495 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u>Robin C Monroe</u> </td> <td style="width: 40%;"> Date: <u>10-7-2012</u> </td> </tr> <tr> <td> Name (type or print): <u>Robin C Monroe</u> </td> <td> Title: <u>Manager</u> </td> </tr> </table>	Signature: <u>Robin C Monroe</u>	Date: <u>10-7-2012</u>	Name (type or print): <u>Robin C Monroe</u>	Title: <u>Manager</u>
Signature: <u>Robin C Monroe</u>	Date: <u>10-7-2012</u>				
Name (type or print): <u>Robin C Monroe</u>	Title: <u>Manager</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the