and the state of t		ter than May 31, 2010	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		ual Report Form		ALLEN STARLEY			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			715 SHOSHONE ST NORTH TWIN FALLS ID 83301			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	STARLEY-LEAVITT INVESTMENT COMPANY, LLC JIM DOUGLAS PO BOX 1027 CEDAR CITY UT 84721-1027		I WIN FALLS				
			3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA	SA					
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	
		P.O. BOX 1027	CEDAR CITY	UT	USA	84721	
MEMBER ALLEN STARLEY		715 SHOSHONE ST NORTH	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  6. Annual Report must be signed.*		be signed.*					
ID Signature: Jim		uglas Date: 03/25/2010					
W 12048	Name (type or print): Jim Douglas		Title: Member				
Processed 03/25/2010	* Electronically provided signatures are accepted as original signatures.						