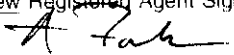
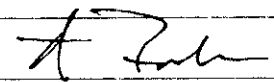


<b>No. W 22195</b>	<b>Due no later than January 31, 2005 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  LES BOIS CAPITAL PARTNERS, LLC PO BOX 9026 BOISE, ID 83707		ANDREW FALES <del>8550 W EMERALD ST STE 110</del> <del>BOISE, ID 83704</del> 4688 W. Garden Ct. BOISE ID 83705  3. New Registered Agent Signature 																			
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1" data-bbox="327 404 1856 569"> <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>Member</td> <td>Andrew Fales</td> <td>PO BOX 9026</td> <td>BOISE</td> <td>ID</td> <td>83707</td> </tr> <tr> <td>Member</td> <td>Charity-Ruth Fales</td> <td>PO BOX 9026</td> <td>BOISE</td> <td>ID</td> <td>83707</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Member	Andrew Fales	PO BOX 9026	BOISE	ID	83707	Member	Charity-Ruth Fales	PO BOX 9026	BOISE	ID	83707
Office held	Name	Street or P.O. Address	City	State	Zip																	
Member	Andrew Fales	PO BOX 9026	BOISE	ID	83707																	
Member	Charity-Ruth Fales	PO BOX 9026	BOISE	ID	83707																	
5. Organized Under the Laws of:  IDAHO W 22195	6. Signature   Name (Typed or Printed) <u>Andrew Fales</u>		Date <u>12/20/08</u>  Title <u>member</u>																			