

No. <b>W 70616</b>		<b>Due no later than Jan 31, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  LINRIVER, LLC STEVE LINTON 1122 HIGHWAY 2 OLDTOWN ID 83822		DANIEL STEVEN LINTON 1122 HIWAY 2 OLD TOWN ID 83822			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
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	
MANAGER	JILL R LINTON	1495 RIVERSIDE RD	PRIEST RIVER	ID	USA	83856	
MANAGER	DANIEL STEVEN LINTON	1495 RIVERSIDE RD	PRIEST RIVER	ID	USA	83856	
5. Organized Under the Laws of:  <b>ID</b> <b>W 70616</b>		6. Annual Report must be signed.*  Signature: Karen Phillips Name (type or print): Karen Phillips					
		Date: 11/24/2009 Title: Office Manager					
Processed 11/24/2009		* Electronically provided signatures are accepted as original signatures.					