No. <b>W 31767</b>		<b>Due no later than Jul 31, 2010</b> 2. Registered Agent and Address (NO PO					PO BOX)	
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ROBERT C. WOLF & ASSOCIATES, L.L.C.  KORINNE E. WOLF  16798 E CAPE HORN RD  BAYVIEW ID 83803-9710		16798 E CAI	ROBERT C WOLF 16798 E CAPE HORN RD BAYVIEW ID 83803-9710  3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
4. Limited Liability Co	mpanies: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	KORINNE E	WOLF	16798 E CAPE HORN RD	BAYVIEW	ID	USA	83803-9710	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
VT W 31767		Signature: Korinne E Wolf			Date: 06/06/2010			
		Name (type o		Title: V President				
Processed 06/06/201	0	* Electronically p	provided signatures are accepted as origina	al signatures.				