No. W 38457		Due no later than Apr 30, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. BE WATER L.L.C. LOREN K LANCASTER 3722 NORTH 2544 EAST TWIN FALLS ID 83301		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				3722 NORTH TWIN FALLS	LOREN K LANCASTER 3722 NORTH 2544 EAST TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE RECEIVED BY DUE	DATE	mes and Addresse	es of at least one Member or Manager.					
Office Held Name		nes and radices.	Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	LOREN K LANCASTER MANUEL ARMENDARIZ		3722 NORTH 2544 EAST 605 CRESTVIEW DR	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 38457		Signature: Loren Lancaster			Date: 02/06/2011			
		Name (type o		Title: Partner				
Processed 02/06/2011		* Electronically p	rovided signatures are accepted as origina	al signatures.				