No. W 16259		Due no later than Aug 31, 2009		2. Regi	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SUFFICIENCY ADVOCATES, L.L.C. WILLIAM LAWRENCE 225 S 10TH E #C MOUNTAIN HOME ID 83647			WILLIAM LAWRENCE 225 S 10TH E #C MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*			
				MOL				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	9	State	Country	Postal Code
MEMBER	WILLIAM LA	WRENCE	225 S 10TH E #C	MOUN	NTAIN HOME	ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 16259		Signature: William M. Lawrence			Date: 09/08/2009			
		Name (type or print): William M. Lawrence			Title: Owner			
Processed 09/08/2009 * Electronically provided signatures are accepted as original signatures.								