No. W 59002		Due no later than Feb 28, 2011		2. Registered Agent and Address (NO PO BOX)			
			450 FALLS AV TWIN FALLS	G KENT TAYLOR 450 FALLS AVE STE 201 TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
	HA REICHLIN JR TRUST N WALKER	PO BOX 19010 1445 VALENCIA ST	RENO TWIN FALLS	NV ID	USA USA	89511 83301	
5. Organized Under the Laws of:	6. Annual Report mu	6. Annual Report must be signed.*					
ID	Signature: Joseph	Signature: Joseph		Date: 12/13/2010			
W 59002	Name (type or pri	Name (type or print): Joseph		Title: Manager			
Processed 12/13/2010	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					