No. W 88808		Due no later than Dec 31, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. KELLYS, LLC SHELLY SPACKMAN PO BOX 127 PRESTON ID 83236		2	2. Registered Agent and Address (NO 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				_	SHELLY SPACKMAN 193 N STATE PRESTON ID 83263 3. New Registered Agent Signature:*			
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER MEMBER	Marilee Spackman Kelly Spackman		PO BOX 127 PO BOX 127		PRESTON PRESTON	ID ID	USA USA	83263 83263
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 88808		Signature: Shelly Spackman			Date: 10/17/2011			
		Name (type or print): Shelly Spackman			Title: Controller			
Processed 10/17/2011	* Electronically provided signatures are accepted as original signatures.							