

No. <b>W 81693</b>	<b>Due no later than Feb 28, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> CREDITLOGISTICS, LLC LORI HALFEN FIVE CONCOURSE PKWY STE 400 ATLANTA GA 30328 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702 USA			
			3. <u>New</u> Registered Agent Signature:*			
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
MANAGER	JON HOFFMANN	FIVE CONCOURSE PKWY STE 400	ATLANTA	GA	USA	30328
5. Organized Under the Laws of:  <b>ID</b> <b>W 81693</b>		6. Annual Report must be signed.* Signature: Denise Robbins Name (type or print): Denise Robbins Date: 01/28/2010 Title: Licensing Specialist				
Processed 01/28/2010		* Electronically provided signatures are accepted as original signatures.				