

No. W 29079	Due no later than Mar 31, 2011 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. SLKF, LLC LEE ANN HOSTETLER PO BOX 915 LEWISTON ID 83501 USA	PAUL D SCHRETTE 1407 16TH AVE LEWISTON ID 83501				
		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
MEMBER	PAUL D SCHRETTE	PO BOX 915	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID W 29079		6. Annual Report must be signed.* Signature: Paul Schrette Name (type or print): Paul Schrette Date: 03/18/2011 Title: President				
Processed 03/18/2011		* Electronically provided signatures are accepted as original signatures.				