No. <b>W 69891</b>		Due no later than Dec 31, 2009		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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  FAIAL, LLC ROBERT E WILLIAMS PO BOX 168 JEROME ID 83338		ROBERT E WILLIAMS 153 E MAIN				
				led.	JEROME ID 83338  3. New Registered Agent Signature:*			
				ı				
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER RICK M ON		AINDIA	2930 S 2300 E		WENDELL	ID	USA	83355
MEMBER	LUIS M AND TRUST	SHARON BETTENCOURT	2930 S 2300 E		WENDELL	ID	USA	83355
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 69891		Signature: Robert E Williams			Date: 10/20/2009			
		Name (type or print): Robert E Williams		Title: Registered Agent				
Processed 10/20/2009		* Electronically provided	signatures are accepted as orig	ginal sign	atures.			