No. <b>W 41773</b>		Due	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		MONICA G	MONICA G COCKERILLE 260 CLEAR CREEK RD BOISE ID 83716  3. New Registered Agent Signature:*			
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.  COCKERILLE LAW OFFICE, P.L.L.C.  MONICA G COCKERILLE  260 CLEAR CREEK RD  BOISE ID 83716						
				BOISE ID				
				3. New Regist				
4. Limited Liability Cor	mpanies: 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	MONICA G	COCKERILLE	260 CLEAR CREEK RD	BOISE	ID	USA	83716	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 41773		Signature: Mon		Date: 08/01/2010				
		Name (type or		Title: Member				
Processed 08/01/2010	0	* Electronically pro	vided signatures are accepted as origin	nal signatures.				