No. **W 83074**	**Due no later than Apr 30, 2010**	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.** JUSTOOLS LLC WM. LYMAN BELNAP 6903 KINGSDALE DR BOISE ID 83704	WM LYMAN BELNAP 6903 KINGSDALE DR BOISE ID 83704 3. New 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	WM. LYMAN BELNAP	6903 KINGSDALE DR.	BOISE	ID	USA	83704

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 83074**	Signature: Wm. Lyman Belnap	Date: 02/11/2010
	Name (type or print): Wm. Lyman Belnap	Title: Manager

Processed 02/11/2010

* Electronically provided signatures are accepted as original signatures.