

No. <b>W 58596</b>	<b>Due no later than Jan 31, 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> ASPEN SWOPE, LLC MICHAEL J SWOPE 223 N 6TH ST #425 BOISE ID 83702		MICHAEL J SWOPE 223 N 6TH ST #425 BOISE ID 83702			
			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	MICHAEL J SWOPE	223 N 6TH ST #425	BOISE	ID	USA	83702
5. Organized Under the Laws of:  <b>ID</b> <b>W 58596</b>	6. Annual Report must be signed.* Signature: Mary Jane Swope Name (type or print): Mary Jane Swope		Date: 12/22/2009 Title: Co-Manager			
Processed 12/22/2009		* Electronically provided signatures are accepted as original signatures.				