

No. W 3889		Due no later than Apr 30, 2013		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. ALPHA-OMEGA, L.L.C. LESLIE D CULLEN 1141 E SAINTE LUCIA DR MERIDIAN ID 83642 USA		LES CULLEN 1141 E SAINTE LUCIA DR MERIDIAN ID 83642			
				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	LES CULLEN	3199 SWEETWATER DR	BOISE	ID	USA	83705	
MEMBER	JOYCE POPP	3199 SWEETWATER DR	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID W 3889		6. Annual Report must be signed.* Signature: Les Cullen Name (type or print): Les Cullen Date: 02/13/2013 Title: Managing Partner					
Processed 02/13/2013		* Electronically provided signatures are accepted as original signatures.					