

No. W 67548	Due no later than 10/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CINDI LE BRETT, LLC CINDY LE BRETT <i>CINDI</i> PO BOX 429 MCCALL ID 83638		CINDY LE BRETT 13827 STEWART CT MCCALL ID 83638		
			3. New Registered Agent Signature: <i>Na</i>		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held OWNER PRESIDENT	Name CINDI LE BRETT	Street or PO Address P.O. BOX 429	City MCCALL	State ID	Zip 83638
5. Organized Under the Laws of: ID W 67548		6. Annual Report must be signed. Signature: <i>Cindi Le Brett</i> Date: <i>8-28-09</i> Name (type or print): <i>CINDI LE BRETT</i> Title: <i>OWNER/PRES</i>			