

No. <b>W 79391</b>		<b>Due no later than Nov 30, 2009</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>Annual Report Form</b>		ERMA R KAUER 1076 S 12TH W REXBURG ID 83440															
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*															
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>ERMA KAUER</td> <td>1076 S 12TH W</td> <td>REXBURG</td> <td>ID</td> <td>USA</td> <td>83440</td> </tr> </tbody> </table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	MEMBER	ERMA KAUER	1076 S 12TH W	REXBURG	ID	USA	83440
Office Held	Name	Street or PO Address	City	State	Country	Postal Code													
MEMBER	ERMA KAUER	1076 S 12TH W	REXBURG	ID	USA	83440													
5. Organized Under the Laws of:  <b>ID W 79391</b>		6. Annual Report must be signed.* Signature: Erma Kauer Name (type or print): Erma Kauer Date: 09/14/2009 Title: Member																	
Processed 09/14/2009		* Electronically provided signatures are accepted as original signatures.																	