

No. W 73167	Due no later than April 30, 2009 Annual Report Form	2. Registered Agent and Office 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 applicable RADIANCE LLC. ALLISSA BURKE 150 112TH ST OROFINO, ID 83544	ALLISSA BURKE 150 112TH ST OROFINO, ID 83544 3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner	Allissa Daniels	150 112th St.	Orofino	ID	83544

5. Organized Under the Laws of: IDAHO W 73167	6. Signature <u>Adaniels</u> Date <u>4-15-09</u> Name (Typed or Printed) <u>Allissa Daniels</u> Title <u>owner</u>
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