

No. W 48487		Due no later than Mar 31, 2009		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. L SQUARED, LLC CLAYTON L JONES 13601 W MCMILLAN RD STE 102 PMB 354 BOISE ID 83713 USA		CLAYTON JONES 14071 W ROCHESTER DR BOISE ID 83713			
				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	JOHN NELSON	1882 S RIVERFORD PLACE	EAGLE	ID	USA	83616	
MANAGER	CLAYTON JONES	14071 W ROCHESTER DR	BOISE	ID	USA	83713	
5. Organized Under the Laws of: ID W 48487		6. Annual Report must be signed.* Signature: Clayton Jones Name (type or print): Clayton Jones Date: 01/23/2009 Title: Manager					
Processed 01/23/2009		* Electronically provided signatures are accepted as original signatures.					