

No. W 58186		Due no later than Jan 31, 2010		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		MYRNA LOWRANCE 826 W 4TH ST KUNA ID 83634			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ARNIE, LLC MYRNA LOWRANCE 826 W 4TH ST KUNA ID 83634 USA					
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	MYRNA LOWRANCE	826 W 4TH ST	KUNA	ID	USA	83634	
MANAGER	JAY LOWRANCE	826 W 4TH ST	KUNA	ID	USA	83634	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 58186		Signature: Myrna Lowrance				Date: 11/17/2009	
		Name (type or print): Myrna Lowrance				Title: Manager	
Processed 11/17/2009		* Electronically provided signatures are accepted as original signatures.					