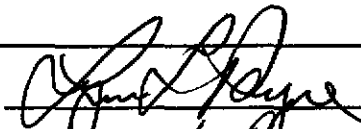


No. <b>W 39487</b>	<b>Due no later than May 31, 2009</b>	<b>2. Registered Agent and Office NO PO BOX</b>
Return to: <b>SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>	
	1. Mailing Address - Correct in this box, if applicable  <b>CERTIFIED RADON TESTING PROFESSIONAL PO BOX 5454 CHUBBUCK, ID 83202</b>	LYNN L PAYNE 12726 N LARAMIE POCATELLO, ID 83202  <b>3. New Registered Agent Signature</b>

**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>
MANAGER	LYNN L PAYNE	P.O. BOX 5454	CHUBBUCK	Id.	83202

<b>5. Organized Under the Laws of:</b> IDAHO W 39487	<b>6.</b> Signature  Name (Typed or Printed) <b>LYNN L. PAYNE</b> Date <b>9-15-09</b> Title <b>MANAGER</b>
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Issued 03/02/2009

**Do Not Tape or Staple**

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