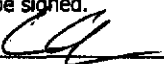


No. W 42581	Due no later than 9/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		CRAIG JOHNSTON 3210 E CHINDEN BLVD 115 322 EAGLE ID 83616	
	ADVANCED HOME SYSTEMS LLC CRAIG JOHNSTON 3210 E CHINDEN BLVD #115-322 EAGLE ID 83616		3. New 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 Zip
Manager	CRAIG JOHNSTON	3210 E Chinden #115322	EAGLE	ID 83616
5. Organized Under the Laws of: ID W 42581		6. Annual Report must be signed. Signature: <u></u> Date: <u>9/28/09</u> Name(type or print): <u>CRAIG JOHNSTON</u> Title: <u>Manager</u>		