

No. W 64206		Due no later than Jul 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MY ARCHITECT, LLC TIMOTHY P LYNCH 301 MAIN STE 101 LEWISTON ID 83501 USA		TIMOTHY P LYNCH 1829 BIRCH AVE LEWISTON ID 83501			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name TIMOTHY P LYNCH	Street or PO Address 1829 BIRCH AVE		City LEWISTON	State ID	Country USA	Postal Code 83501
5. Organized Under the Laws of: ID W 64206		6. Annual Report must be signed.* Signature: Timothy P Lynch Name (type or print): Timothy P Lynch Date: 05/11/2012 Title: Owner					
Processed 05/11/2012 * Electronically provided signatures are accepted as original signatures.							