

No. W 49139		Due no later than Mar 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. SNS ENTERPRISES, L.L.C. SAM M ROBINSON PO BOX 731 GRANGEVILLE ID 83530 USA		DAREN W FALES 204 W NORTH ST GRANGEVILLE ID 83530			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SAM ROBINSON	1199 OLD HWY 7	GRANGEVILLE	ID	USA	83530	
MEMBER	SUSAN ROBINSON	1199 OLD HWY 7	GRANGEVILLE	ID	USA	83530	
5. Organized Under the Laws of: ID W 49139		6. Annual Report must be signed.* Signature: Susan Robinson Name (type or print): Susan Robinson					
		Date: 01/17/2012 Title: Owner					
Processed 01/17/2012 * Electronically provided signatures are accepted as original signatures.							