No. W 65405		Due no later than Aug 31, 2009			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CAROLYN S CRAMER				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. 39C LLC CAROLYN S. CRAMER 509 CREEKSIDE PL NAMPA ID 83686 USA			509 CREEKSIDE PL NAMPA ID 83686 3. New Registered Agent Signature:*			
4. Limited Liability Compani	ies: Enter Nar	nes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
	JODY SEELY CAROLYN S		2429 LAPPIN LANE 509 CREEKSIDE PL		COUNCIL NAMPA	ID ID	USA USA	83612 83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 65405		Signature: Carolyn S. Cramer Date: 07/23/2009						
		Name (type or print): Carolyn S. Cramer Title: Mana				Manager		
Processed 07/23/2009 * Electronically provided signatures are accepted as original signatures.								