


No. <b>W 24445</b>	<b>Due no later than May 31, 2013 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>							
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> TREASURE VALLEY ART GLASS LLC DEBORAH POWELL 1224 N. CAN ADARD <del>STAR ID 83669-5236 USA</del> <b>76 S. GRAYS LANE NAMPA, ID 83687</b>		DEBORAH POWELL 1224 N. CAN ADA RD <del>STAR ID 83669-5236</del> <b>76 S GRAYS LN NAMPA, ID 83687</b>							
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.										
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"><b>Manager or Member</b></td> <td style="width: 20%;"><b>Name</b></td> <td style="width: 30%;"><b>Street or PO Address</b></td> <td style="width: 10%;"><b>City</b></td> <td style="width: 10%;"><b>State</b></td> <td style="width: 10%;"><b>Country</b></td> <td style="width: 15%;"><b>Postal Code</b></td> </tr> </table>				<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State</b>	<b>Country</b>	<b>Postal Code</b>
<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State</b>	<b>Country</b>	<b>Postal Code</b>				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DEBORAH POWELL	76 S. GRAYS LN.	NAMPA,	ID		83687				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DOUGLAS POWELL	"	"							
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
5. Organized Under the Laws of:  <b>IDAHO W 24445</b>	6. Signature:  Name (type or print): <b>DOUGLAS POWELL</b>		Date: <b>3-20-13</b> Title: <b>MEMBER</b>							