

No. <b>W 60636</b>		<b>Due no later than Mar 31, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  211 EAST HIGHLAND, LLC TIM HACHMAN 55 LARKSPUR ST STE 2 SAN RAFAEL CA 94901		GREG SCRIVNER 913 W RIVER STE 300 BOISE ID 83702			
<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 at least one Member or Manager.							
Office Held MANAGER	Name TIM HACHMAN	Street or PO Address 55 LARKSPUR ST STE 2		City SAN RAFAEL	State CA	Country USA	Postal Code 94901
5. Organized Under the Laws of:  <b>ID</b> <b>W 60636</b>		6. Annual Report must be signed.*  Signature: Tim Hachman Name (type or print): Tim Hachman  Date: 01/15/2010 Title: Manager					
Processed 01/15/2010 * Electronically provided signatures are accepted as original signatures.							