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| No. W 76495 | Due no later than 7/31/2009 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | ROBIN C MONROE 1760 W STATE ST BOISE ID 83702 | |
| | ROBIN C. MONROE, LLC 1760 W STATE ST BOISE ID 83702 | | 3. New 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 Zip |
| Manager | Robin C Monroe | 1760 W. State St | Boise | Id 83702 |
| 5. Organized Under the Laws of: ID W 76495 | | 6. Annual Report must be signed. Signature: <u>Robin C Monroe</u> Date: <u>5-27-2009</u> Name(type or print): <u>Robin C Monroe</u> Title: <u>Manager</u> | | |

Issued 5/21/2009 by CLH

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