

No. W 29639

Due no later than April 30, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

MARION LUQUE, P.L.L.C.  
502 W TWO RIVERS DR  
EAGLE, ID 83616

MARION LUQUE  
502 W TWO RIVERS DR  
EAGLE, ID 83616

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held

Name

Street or P.O. Address

City

State

Zip

Member Marion L Luque 502 W Two Rivers Dr. Eagle ID 83616

5. Organized Under the Laws of:

IDAHO  
W 29639

6.

Signature

*Marion Luque* Date *2/12/08*

Name (Typed or Printed)

*Marion Luque* Title *Owner*

Issued 02/01/2008

Do Not Tape or Staple

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