

No. W 59048		Due no later than Feb 28, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. CC2, LLC CHRIS TAYLOR 366 SE 44TH AVE PORTLAND OR 97215		KELLY MILLER 3615 VISTA DRIVE NAMPA ID 83686			
				3. <u>New</u> 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	Country	Postal Code	
MEMBER	CHRIS TAYLOR	366 SE 44TH AVE	PORTLAND	OR	USA	97215	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 59048		Signature: Chris S Taylor				Date: 12/22/2012	
		Name (type or print): Chris S Taylor				Title: Member	
Processed 12/22/2012		* Electronically provided signatures are accepted as original signatures.					