No. <b>W 41925</b>		Due no later than Aug 31, 2011	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MEADOW CI NELSON MA 570 LIONS I		570 LIONS I BONNERS FI	NELSON MAST 570 LIONS DEN RD BONNERS FERRY ID 83805  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	Navasa and Address						
Office Held Name	er Names and Addres	ses of at least one Member or Manager.  Street or PO Address	City	State	Country	Postal Code	
MANAGER NELSOI	N MAST EAN MAST	HC 01 BOX 329 A HC 01 BOX 329A	City NAPLES NAPLES	ID ID	Country USA USA	83847 83847	
<b>ID</b> Sign		5. Annual Report must be signed.*  Signature: Donna Mast  Name (type or print): Donna Mast  Title: Manager					
Processed 06/13/2011	* Electronically	* Electronically provided signatures are accepted as original signatures.					