No. W 105794	Annual Report Form 1. Mailing Address: Correct in this box if needed. (NOT A P.O. BC RAYMOND D I 8629 W ATWA	2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		RAYMOND D INGLIN SR 8629 W ATWATER DR GARDEN CITY ID 83714
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature.
4. Limited Liability Manager or Member	Companies: Enter Names and Addresses of Manage Name Street or PO Address City	
Manager Member	Parmond D. Taglin Ca. D.O.	Dem 100165 Deies TD
ivianiago.	Raymond, D. Inglin, Sr. P.O	
Manager Member	Raymond, D. Inglin, Sr. P.O	83719
	kaymond, D. Inglin, St. P.O	
Manager Member	kaymond, D. Inglin, St. P.O	
Manager Member Manager Member		83719 Date:
Manager Member Manager Member Manager Member 5. Organized Under the La	ws of: 6.	83719