No. <b>W 87764</b>	ı	Due no later than Oct 31, 2011	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CONRA LLC  BRUCE KNIEFEL  2621 E STARCREST DR  BOISE ID 83712		BRUCE A KNIEFEL 2621 E STARCREST DR BOISE ID 83712  3. New Registered Agent Signature:*			
PO BOX 83720 BOISE, ID 83720-0080	BRUCE KNIE 2621 E STAI						
NO FILING FEE IF RECEIVED BY DUE DATE	10000						
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER FELIX ARAMBURU		1809 PRIEST AVENUE	BOISE	ID	USA	83706	
5. Organized Under the Laws of:	Organized Under the Laws of:  6. Annual Report must be signed.*						
ID	Signature: I	Bruce Kniefel		Date: 09/05/2011			
W 87764	Name (type	or print): Bruce Kniefel		Title: Officer			
Processed 09/05/2011	* Electronically	* Electronically provided signatures are accepted as original signatures.					