No. W 52402		Due no later than Jul 31, 2011		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		D THO	D THOMAS STILLWAUGH			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SHADOWFAX SIX, LLC D THOMAS STILLWAUGH P.O. BOX 369 CHALLIS ID 83226		MIDDLE	9300 E. HANSEN RD. MIDDLETON ID 83644 3. New Registered Agent Signature:*			
Limited Liability Compa	ınies: Enter Naı	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
Manager Manager	D THOMAS STILLWAUGH TERRI L STILLWAUGH		P.O. BOX 369 P.O. BOX 369	CHALLIS CHALLIS		USA USA	83226 83226	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 52402		Signature: Terri Stillwaugh			Date: 05/26/2011			
		Name (type or print): Terri Stillwaugh			Title: Manager			
Processed 05/26/2011		* Electronically prov	vided signatures are accepted as origi	nal signatures.				