No. W 46126 Return to:		Due no later than Jan 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. TRI STAR ILC DEBBIE ARVIZU 175 S CROMWELL PL BOISE ID 83709 USA		2.	Registered Agent and Address (NO PO BOX) DEBBIE ARVIZU 175 S CROMWELL PL BOISE ID 83709 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of a	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	DEBBIE K A	RVIZU	175 S CROMWELL PL		BOISE	ID	USA	83709
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 46126		Signature: Debbie Arvizu			Date: 01/09/2010			
		Name (type or print): Debbie Arvizu			Title: Manager			
Processed 01/09/2010 * Electronically provided signatures are accepted as original signatures.								