December 11, 1997

DAVID RASMUSSEN 4400 S 1500 W REXBURG ID 83440

RE: AUTUMN WINDS LLC W 1976

Dear DAVID:

Please be certain that the name(s) and address(es) and the appropriate box in block 4 are complete. Idaho law requires that at least one (1) manager/member of the limited liability company be listed.

The annual report form must be back in our office by 5:00 on December 31, 1997 to avoid cancellation.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,

Sheryl Derhies

Sheryl DeVries Corporate Division

Enclosures: cited

	Due No Later Than November 30,	2. Registered Agent	
eturn to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct	DAVID L 4400 S 1	RASMUSSEN 500 W
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	AUTUMN WINDS, L.L.C. DAVID L RASMUSSEN 4400 S 1500 W	REXBURG	ID 83440
NO FEE REQUIRED	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3. Organized Under	the Laws of:
FINAL NOTICE *		l ID	W 1976
Corporations: Enter Names a Limited Liability Companies:	and Business Addresses of President, Secretary and Directors Enter Names and Addresses of Managers or Memb	ers (check one)	
Office held Nan	ne Street or P.O. Address	City	State Zip
	·v		
SIGNATURE OF CU	RRENT RA Signature		11/30/97
and Down	Signature Acut Andrew Name (Typed or Printed)	Date	
and Down	Signature and		
and Down	Name (Typed or DAVID L. RAV		ees.
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and Dorm	Name (Typed or DAVID L. RAV		ees.