No. W 100453		Due no later than Feb 29, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. PERKINS DISTRIBUTION, LLC DANIEL PERKINS 3515 E 3195 N KIMBERLY ID 83341			DANIEL PERKINS 3515 E 3195 N KIMBERLY ID 83341 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of	f at least one Member or Manager					
Office Held	Name	ries and ridaresses of	Street or PO Address		City	State	Country	Postal Code
MANAGER	NAGER DANIEL PERKINS		3515 E 3195 N		KIMBERLY	ID	USA	83341
5. Organized Under the Laws of: ID W 100453		6. Annual Report must be signed.* Signature: Daniel Perkins Name (type or print): Daniel Perkins			Date: 02/12/2012 Title: Owner/Operator			
Processed 02/12/2012 * Electronically provided signatures are accepted as original signatures.								