No. <b>W 58400</b>		Due no later than Jan 31, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  WOOD RIVER NATURAL FOODS, LLC MELINDA SPRINGS 121 PUNKIN CENTER RD. BELLEVUE ID 83313		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				121 PUNKIN BELLEVUE II	RICHARD A SPRINGS III  121 PUNKIN CENTER RD BELLEVUE ID 83313  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compani	ies: Enter Nai	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	RICHARD A MELINDA C		121 PUNKIN CENTER RD 121 PUNKIN CENTER RD.	BELLEVUE BELLEVUE	ID ID	USA USA	83313 83318	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 58400		Signature: Me		Date: 11/20/2013				
		Name (type o		Title: Manager				
Processed 11/20/2013		* Electronically provided signatures are accepted as original signatures.						