No. **W 131221**	**Due no later than Nov 30, 2017**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** DR TRUCKING LLC DELL RAY PRIEST 1159 N 1340 E SHELLEY ID 83274	DEL RAY PRIEST 1159 N 1340 E SHELLEY ID 83274 3. New Registered Agent Signature:*

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	SANDRA PRIEST	1159 NORTH 1340 EAST	SHELLEY	ID	USA	83274

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 131221**	Signature: Sandra priest	Date: 09/18/2017
	Name (type or print): Sandra priest	Title: Member

Processed 09/18/2017

* Electronically provided signatures are accepted as original signatures.