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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------|---------|-------------|--|
| No. <b>W 10215</b>                                                                                                                                     |               | <b>Due no later than Nov 30, 2015</b>                                                                                                      |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b>                                                                                                                  |          | KELLY R VANCE<br>2710 CHAPARRAL CIRC<br>HOMEDALE ID 83628 |         |             |  |
|                                                                                                                                                        |               | <b>1. Mailing Address: Correct in this box if needed.</b><br>VANCO READY MIX, LLC<br>KELLY R VANCE<br>PO BOX 7<br>HOMEDALE ID 83628<br>USA |          | 3. <u>New</u> 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                                                                                                                                                 | KELLY R VANCE | 100 CHAPARRAL                                                                                                                              | HOMEDALE | ID                                                        | USA     | 83628       |  |
| MEMBER                                                                                                                                                 | MARION VANCE  | PO BOX 7                                                                                                                                   | HOMEDALE | ID                                                        | USA     | 83628       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 10215</b>                                                                                           |               | 6. Annual Report must be signed.*<br>Signature: Kelly Vance<br>Name (type or print): Kelly Vance                                           |          |                                                           |         |             |  |
|                                                                                                                                                        |               | Date: 09/22/2015<br>Title: Member                                                                                                          |          |                                                           |         |             |  |
| Processed 09/22/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                  |          |                                                           |         |             |  |