No. W 13186  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Oct 31, 2012  Annual Report Form		2.	Registered Agent and Address (NO PO BOX)  JOHN F SALOVE			
		1. Mailing Address: Correct in this box if needed.  RIVERFRONT, LLC  JOHN F SALOVE  PO BOX 607  MARSING ID 83639			111 RIVERFRONT DR MARSING ID 83639  3. New Registered Agent Signature:*			
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of a	it least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER MEMBER	JOHN F SALOVE DOROTHY SALOVE		111 RIVERFRONT DR 111 RIVERFRONT DR.		MARSING MARSING	ID ID	USA USA	83639 83639
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 13186		Signature: John Salove			Date: 08/15/2012			
		Name (type or print): John Salove			Title: Member			
Processed 08/15/2012	* Electronically provided signatures are accepted as original signatures.							