No. W 52795		Due no later than Jul 31, 2012		2. Regist	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		200 0000 00 00	LESA D HORROCKS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ROCKMOUNT SUPPLY, LLC VIRGIL JAHNKE 845 W CENTER STE C POCATELLO ID 83204		POCA	845 W CENTER STE C POCATELLO ID 83204 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	oanies: Enter N	ames and Addresses of at least	one Member or Manager.					
Office Held	Name	Str	eet or PO Address	City	S	State	Country	Postal Code
MANAGER VIRGIL JAHNKI		NKE 274	7 FAIRGROUNDS RD	AMERIC	AN FALLS	ID	USA	83211
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 52795		Signature: Virgil Jahnke			Date: 08/18/2012			
		Name (type or print): Virgil Jahnke			Title: Manager			
Processed 08/18/2012 * Electronically provided signatures are accepted as original signatures.								