No. W 158971		Annual Report Form 1. Mailing Address: Correct in this box if needed. RIVERS EDGE COFFEE LLC PO BOX 477 RIRIE ID 83443		2. Regi	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				4877 RIRI	ROBERT C STOBIE 4877 E COUNTY LINE RD RIRIE ID 83443-8344 3. New Registered Agent Signature:*			
RECEIVED BY DUE 4. Limited Liability Compan		 nmes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	ROBERT C	STOBIE	4877 E COUNTY LINER RD	RIRIE	ID	USA	83443	
5. Organized Under the Laws of: ID W 158971		6. Annual Report must be signed.* Signature: Robert C Stobie Name (type or print): Robert C Stobie			Date: 09/30/2017 Title: Owner			
Processed 09/30/2017 * Electronically provided signatures are accepted as original signatures.								