

No. W 96738		Due no later than Sep 30, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GRAVY RIVER LLC SHERRY ELROD PO BOX 852 SALMON ID 83467		JOHN TREANKLER 742 HWY 93 N CARMEN ID 83462			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name SHERRY L ELROD	Street or PO Address PO BOX 852		City SALMON	State ID	Country USA	Postal Code 83467
5. Organized Under the Laws of: ID W 96738		6. Annual Report must be signed.* Signature: Sherry Elrod Name (type or print): Sherry Elrod Date: 07/13/2012 Title: Manager/Member					
Processed 07/13/2012 * Electronically provided signatures are accepted as original signatures.							