No. W 48559		Due no later than Mar 31, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ECRETARY OF STATE 00 WEST JEFFERSON O BOX 83720		Annual Report Form 1. Mailing Address: Correct in this box if needed. GRANITE CONCEPTS, LLC CHAD MCVICARS 4020 HATWAI RD		JULIE MCVICARS 21279 S. FOUR ECHOES ROAD WORLEY ID 83876			
NO FILING FEE IF RECEIVED BY DUE DATE		LEWISTON ID 83501		3. <u>New</u> Registered Agent Signature:*				
The state of the s		nes and Addresses	of at least one Member or Manager.					
	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JOHN MCVIC			29978 THIESSEN RD	LEWISTON	ID	USA	83501	
	MARK DARNELL CHAD W MCVICARS		1056 RIPON AVE 2365 RESERVOIR RD	LEWISTON CLARKSTON	ID WA	USA USA	83501 99403	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 48559		Signature: Chad McVicars		Date: 04/14/2014				
		Name (type or	Title: Managing Member					
* Electronically provided signatures are accepted as original signatures.								