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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------|---------|------------------|--|
| No. <b>W 105696</b>                                                                                                                                    |                      | <b>Due no later than Aug 31, 2015</b>                                                                                                           |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                      | <b>1. Mailing Address: Correct in this box if needed.</b><br>MILK HAULER SERVICES, LLC<br>DARRELL J ESTERBROOK<br>PO BOX 745<br>JEROME ID 83338 |        | DARRELL JASON ESTERBROOK<br>5651 US HWY 93<br>JEROME ID 83338 |         |                  |  |
|                                                                                                                                                        |                      |                                                                                                                                                 |        | 3. <u>New</u> Registered Agent Signature:*                    |         |                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                      |                                                                                                                                                 |        |                                                               |         |                  |  |
| Office Held                                                                                                                                            | Name                 | Street or PO Address                                                                                                                            | City   | State                                                         | Country | Postal Code      |  |
| MEMBER                                                                                                                                                 | DARRELL J ESTERBROOK | 5651 US HWY 93                                                                                                                                  | JEROME | ID                                                            | USA     | 83338            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                      | 6. Annual Report must be signed.*                                                                                                               |        |                                                               |         |                  |  |
| <b>ID<br/>W 105696</b>                                                                                                                                 |                      | Signature: HEIDI ESTERBROOK                                                                                                                     |        |                                                               |         | Date: 06/24/2015 |  |
|                                                                                                                                                        |                      | Name (type or print): HEIDI ESTERBROOK                                                                                                          |        |                                                               |         | Title: MEMBER    |  |
| Processed 06/24/2015                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                       |        |                                                               |         |                  |  |