No. <b>W 104115</b>		Due no later than Jun 30, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		KENNETH MALONE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CLEARWATER SAW SALES, LLC  TRACY FREI  175 HWY 82  LOSTINE OR 97857			10 S MAIN PIERCE ID 83546  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compani	es: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	KENNETH M.	ALONE	10 S MAIN		PIERCE	ID	USA	83546
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kenneth Malone			Date: 04/22/2014			
W 104115		Name (type or print): Kenneth Malone			Title: Manager			
Processed 04/22/2014 * Electronically provided signatures are accepted as original signatures.								