No. W 31191		Due no later than Jun 30, 2010		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LORALI SIMMONS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RIVER SHUTTLES, LLC LORALI SIMMONS 512 GULEKE ST SALMON ID 83647			512 GULEKE ST SALMON ID 83647 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER LORALI SIMMONS		MONS	512 GULEKE ST		SALMON	ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Lorali Simmons			Date: 04/19/2010			
W 31191		Name (type or print): Lorali Simmons			Title: Owner			
Processed 04/19/2010 * Electronically provided signatures are accepted as original signatures.								