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| No. W 124885 | Due no later than May 31, 2016 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 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | KASSANDRA GROLL 762 S RIVER RD ST ANTHONY ID 83445 | | | |
| | RAW SUPPLY, LLC JACOB GROLL 762 S RIVER RD ST ANTHONY ID 83445 | | 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 | JACOB LEE GROLL | 762 S RIVER RD | ST ANTHONY | ID | USA | 83445 |
| 5. Organized Under the Laws of: ID W 124885 | | 6. Annual Report must be signed.* Signature: Kassandra Groll Name (type or print): Kassandra Groll | | Date: 04/04/2016 Title: Agent | | |
| Processed 04/04/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |