| No. W 86691 Return to: | | Due no later than Sep 30, 2018 Annual Report Form | | | Registered Agent and Address (NO PO BOX) BRADLEY DENNIS CAPPS | | | | |
|--|---|--|---------------------------------------|--------------------------|---|------------------|-------------|--|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. RIM ROCK LEASING, LLC BRADLEY D CAPPS PO BOX 824 JEROME ID 83338 | | 5439 US HII JEROME ID | 5439 US HIGHWAY 93 JEROME ID 83338 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | | |
| 4. Limited Liability Compan | nies: Enter M | lames and Address | es of at least one Member or Manager. | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | | |
| MEMBER | BRADLEY | D CAPPS | 483 SOUTH 300 WEST | JEROM | ID | USA | 83338 | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID W 86691 | | Signature: Bl | Signature: BRADLEY D CAPPS | | | Date: 08/20/2018 | | | |
| | | Name (type o | Name (type or print): BRADLEY D CAPPS | | | Title: Member | | | |
| Processed 08/20/2018 | rocessed 08/20/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |