No. W 12739		Due no later than Aug 31, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. RLM RANCH, LLC JACOB PATRICK MOORE 1263 W 4000 N REXBURG ID 83440		2. Registered Ag	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				JACOB PATRICK MOORE 1721 W. 4200 N. REXBURG ID 83440 3. New Registered Agent Signature:*				
4. Limited Liability Compa	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	
MANAGER MANAGER MANAGER MANAGER	JACOB PATRICK MOORE KRISTIN KAYE MOORE KATHRINE MARIE MOORE KOFOED JUSTEN RAYE MOORE		PO BOX 322 1263 W 4000 N 3257 S HARRISON BLVD C11 1263 W 4000 N	TETON CITY REXBURG OGDEN REXBURG	ID UT ID		83451 83440 84403 83440	
5. Organized Under the Laws of:		6. Annual Report must l				_		
ID W 12739		Signature: Jacob P. Moore			Date: 08/20/2015			
		Name (type or print): Jacob P. Moore		Title: Manager				
Processed 08/20/2015		* Electronically provided	signatures are accepted as original	signatures.	•		•	