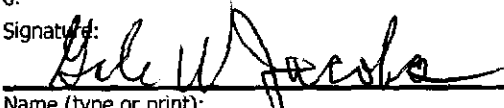
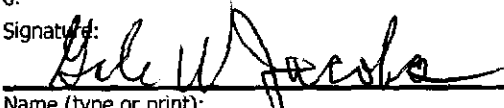
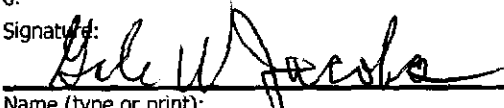


No. W 82253	Due no later than Mar 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) GALE W JACOBS 1454 S MAIN ST PAYETTE ID 83661																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. DISCOUNT U-CART CONCRETE, LLC PO BOX 416 PAYETTE ID 83661		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 20%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Gale W. Jacobs</td> <td>P.O. Box 416</td> <td>Payette ID</td> <td>Payette</td> <td></td> <td>83661</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Gale W. Jacobs	P.O. Box 416	Payette ID	Payette		83661	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 82253 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> Signature:  </td> <td style="width: 40%; padding: 5px;"> Date: <div style="text-align: center; font-size: 1.2em;">3-25-14</div> </td> </tr> <tr> <td style="padding: 5px;"> Name (type or print): <div style="text-align: center; font-size: 1.2em;">Gale W. Jacobs</div> </td> <td style="padding: 5px;"> Title: <div style="text-align: center; font-size: 1.2em;">owner</div> </td> </tr> </table>		Signature: 	Date: <div style="text-align: center; font-size: 1.2em;">3-25-14</div>	Name (type or print): <div style="text-align: center; font-size: 1.2em;">Gale W. Jacobs</div>	Title: <div style="text-align: center; font-size: 1.2em;">owner</div>																															
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Issued 02/20/2014 by JAH		119007																																				