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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------|-------|---------|-------------|
| No. <b>W 83462</b>                                                                                                                                     | <b>Due no later than Apr 30, 2015</b><br><b>Annual Report Form</b>                                                                         |                                                                           | 2. Registered Agent and Address <b>(NO PO BOX)</b>   |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>RF AUTO SALES LLC<br>RICK FORSMANN<br>PO BOX 96<br>COTTONWOOD ID 83522<br>USA |                                                                           | RICK FORSMANN<br>151 FORSMANN RD<br>COTTONWOOD 83522 |       |         |             |
|                                                                                                                                                        |                                                                                                                                            |                                                                           | 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                                                                                                                                                 | RICK W FORSMANN                                                                                                                            | 151 FORSMANN RD                                                           | COTTONWOOD                                           | ID    | USA     | 83522       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 83462</b>                                                                                           | 6. Annual Report must be signed.*<br>Signature: Rick Forsmann<br>Name (type or print): Rick Forsmann                                       |                                                                           | Date: 02/18/2015<br>Title: owner                     |       |         |             |
| Processed 02/18/2015                                                                                                                                   |                                                                                                                                            | * Electronically provided signatures are accepted as original signatures. |                                                      |       |         |             |