

|                                                                                                                                                        |             |                                                                                                                                         |       |                                                      |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------|---------|------------------|--|
| No. <b>W 86554</b>                                                                                                                                     |             | <b>Due no later than Aug 31, 2011</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>ROSE TRUCKING, LLC<br>WALTER ROSE<br>1020 EAST 100 SOUTH<br>DECLO ID 83323 |       | WALTER ROSE<br>1020 EAST 100 SOUTH<br>DECLO ID 83323 |         |                  |  |
|                                                                                                                                                        |             |                                                                                                                                         |       | 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      |  |
| MANAGER                                                                                                                                                | WALTER ROSE | 1020 EAST 100 SOUTH                                                                                                                     | DECLO | ID                                                   | USA     | 83323            |  |
| 5. Organized Under the Laws of:                                                                                                                        |             | 6. Annual Report must be signed.*                                                                                                       |       |                                                      |         |                  |  |
| <b>ID<br/>W 86554</b>                                                                                                                                  |             | Signature: Walter Rose                                                                                                                  |       |                                                      |         | Date: 06/10/2011 |  |
|                                                                                                                                                        |             | Name (type or print): Walter Rose                                                                                                       |       |                                                      |         | Title: Manager   |  |
| Processed 06/10/2011                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                               |       |                                                      |         |                  |  |