No. <b>W 139867</b> Return to:		Due no later than Jul 31, 2017 Annual Report Form			2. Registered Agent and Address (NO PO BOX)  JASON M PETERSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ROCKY BENCH, LLC ROCKY BENCH LLC PO BOX 653 RIRIE ID 83443		RIRIE ID	17173 E OLD RIRIE HWY RIRIE ID 83443  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JASON M PETERSON		P.O. BOX 653	RIRIE	ID	USA	83443	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jaso		Date: 07/01/2017				
W 139867		Name (type or p		Title: Manager				
Processed 07/01/2017 * Electronically provided signatures are accepted as original signatures.								