No. **W 87158**	**Due no later than Sep 30, 2012**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** RMH8 LLC STEVEN L RICE 512 S ROCKY POINT CT POST FALLS ID 83854	STEVEN L RICE 512 S ROCKY POINT CT POST FALLS ID 83854 3. New 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	STEVE L RICE	512 S. ROCKY POINT CT	POST FALLS	ID	USA	83854

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 87158**	Signature: Steve Rice	Date: 07/13/2012
	Name (type or print): Steve Rice	Title: Manager

Processed 07/13/2012

* Electronically provided signatures are accepted as original signatures.