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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------|---------|------------------|--|
| No. <b>W 149054</b>                                                                                                                                    |            | <b>Due no later than Mar 31, 2017</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><br>CJ TRUCKING LLC<br>CHRISTOPHER JASON HALL<br>451 S STATE<br>PRESTON ID 83263<br>USA |         | CHRISTOPHER HALL<br>451 S STATE<br>PRESTON ID 83263-8326 |         |                  |  |
|                                                                                                                                                        |            |                                                                                                                                                      |         | 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                                                                                                                                                 | DAWNA HALL | 451 SOUTH STSTE                                                                                                                                      | PRESTON | ID                                                       | USA     | 83263            |  |
| 5. Organized Under the Laws of:                                                                                                                        |            | 6. Annual Report must be signed.*                                                                                                                    |         |                                                          |         |                  |  |
| <b>ID<br/>W 149054</b>                                                                                                                                 |            | Signature: christopher hall                                                                                                                          |         |                                                          |         | Date: 01/22/2017 |  |
|                                                                                                                                                        |            | Name (type or print): christopher hall                                                                                                               |         |                                                          |         | Title: manager   |  |
| Processed 01/22/2017                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                            |         |                                                          |         |                  |  |