

No. W 119531	Due no later than Dec 31, 2014 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		PATRICIA M GHRAMM 388 HWY 55 HORSESHOE BEND 83629			
	WHITE HORSE GROCERY & MERCANTILE, LLC PATRICIA M GHRAMM 388 HWY 55 HORSESHOE BEND ID 83629		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	PATRICIA M GHRAMM	P.O. BOX 6	HORSESHOE BEND	ID	USA	83629
5. Organized Under the Laws of: ID W 119531		6. Annual Report must be signed.* Signature: Patricia M Ghramm Name (type or print): Patricia M Ghramm Date: 11/06/2014 Title: Owner, Managing Member				
Processed 11/06/2014		* Electronically provided signatures are accepted as original signatures.				