

|                                                                                                                                                        |                |                                                                                                                                                         |          |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 103</b>                                                                                                                                       |                | Due no later than Dec 31, 2011                                                                                                                          |          | 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>BARNES TRUCKING, L.L.C.<br>BOYCE J BARNES<br>PO BOX 309<br>MCCAMMON ID 83250           |          | BOYCE J BARNES<br>1824 E US HWY 30<br>MCCAMMON ID 83250 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                         |          | 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                                                                                                                                                | BOYCE J BARNES | 9065 S. OLD HIGHWAY 91                                                                                                                                  | MCCAMMON | ID                                                      | USA     | 83250       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 103</b>                                                                                             |                | 6. Annual Report must be signed.*<br>Signature: Brandon J Barnes<br>Name (type or print): Brandon J Barnes<br>Date: 01/12/2012<br>Title: Office Manager |          |                                                         |         |             |  |
| Processed 01/12/2012                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                               |          |                                                         |         |             |  |