No. <b>W 10219</b>	Due no later than Nov 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		ROBERT C CRAIGO			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  R. C. CRAIGO TRUCKING L.L.C.  ROBERT C CRAIGO  2770 W HARGRAVE AVE  POST FALLS ID 83854  USA		2770 W HARGRAVE AVE POST FALLS ID 83854			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
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 ROBERT C	CRAIGO 2770 \	W. HARGRAVE AVE	POST FALLS	ID	USA	83854
5. Organized Under the Laws of:	the Laws of:  6. Annual Report must be signed.*					
ID	Signature: Robert C Craigo		Date: 10/31/2013			
W 10219	Name (type or print): Robert C Craigo		Title: Owner-Manager			
Processed 10/31/2013	* Electronically provided signatures are accepted as original signatures.					