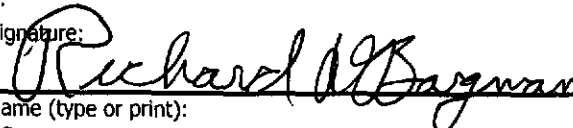
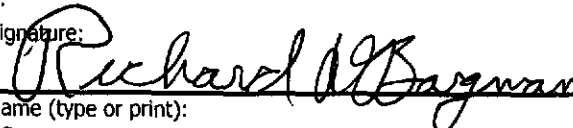
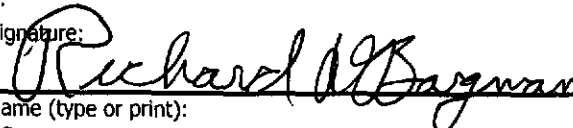


No. <b>W 19113</b>	Due no later than May 31, 2012 <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> RICHARD BARGMAN 230 CITY ST NEWDALE ID 83436
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> D AND R 4WD SPECIALTIES L.L.C. RICHARD BARGMAN 230 CITY PO BOX 186 NEWDALE ID 83436		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.
 

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RICHARD D BARGMAN	PO BOX 186	NEWDALE ID.	FREMONT		83436
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 19113</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>6-19-12</u> </td> </tr> <tr> <td>           Name (type or print):  <u>RICHARD D BARGMAN</u> </td> <td>           Title:  <u>OWNER</u> </td> </tr> </table>	Signature: 	Date: <u>6-19-12</u>	Name (type or print): <u>RICHARD D BARGMAN</u>	Title: <u>OWNER</u>
Signature: 	Date: <u>6-19-12</u>				
Name (type or print): <u>RICHARD D BARGMAN</u>	Title: <u>OWNER</u>				