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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 29284</b>                                                                                                                                     |                  | <b>Due no later than Mar 31, 2013</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ADVANCED RETAIL SYSTEMS, LLC<br>ASHLEY HICKERSON<br>650 N ARMSTRONG PL<br>BOISE ID 83704-0825<br>USA |       | CORPORATION SERVICE COMPANY<br>12550 W EXPLORER DR STE 100<br>BOISE ID 83713<br>USA |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                                                                        |       | 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                                                                                                                                                 | WINCO FOODS, LLC | 650 N ARMSTRONG PL                                                                                                                                                                                     | BOISE | ID                                                                                  | USA     | 83704-0825       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                                                                      |       |                                                                                     |         |                  |  |
| <b>DE</b><br><b>W 29284</b>                                                                                                                            |                  | Signature: Gary R. Piva                                                                                                                                                                                |       |                                                                                     |         | Date: 01/29/2013 |  |
|                                                                                                                                                        |                  | Name (type or print): Gary R. Piva                                                                                                                                                                     |       |                                                                                     |         | Title: Manager   |  |
| Processed 01/29/2013                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                                              |       |                                                                                     |         |                  |  |