

|                                                                                                                                                        |                  |                                                                                        |       |                                                        |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|------------------|--|
| No. <b>W 75941</b>                                                                                                                                     |                  | <b>Due no later than Jul 31, 2016</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>                                                              |       | ROBERT AMIDON<br>8699 GANTZ AVE<br>BOISE ID 83709-7300 |         |                  |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b>                              |       | 3. <u>New</u> Registered Agent Signature:*             |         |                  |  |
|                                                                                                                                                        |                  | ROCKY MOUNTAIN GRAVEL, LLC<br>ROBERT G AMIDON<br>8699 GANTZ AVE<br>BOISE ID 83709-7300 |       |                                                        |         |                  |  |
| 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                                                                                                                                                 | ROBERT G. AMIDON | 8699 GANTZ AVE                                                                         | BOISE | ID                                                     | USA     | 83709-7300       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                      |       |                                                        |         |                  |  |
| <b>ID<br/>W 75941</b>                                                                                                                                  |                  | Signature: Robert G. Amidon                                                            |       |                                                        |         | Date: 05/24/2016 |  |
|                                                                                                                                                        |                  | Name (type or print): Robert G. Amidon                                                 |       |                                                        |         | Title: Member    |  |
| Processed 05/24/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.              |       |                                                        |         |                  |  |