

No. W 61228	Due no later than Apr 30, 2011 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) M DEVEL HILL 68 SOUTH 275 EAST DRIGGS ID 83422
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. GOTTA GO TRUCKING, LLC 2875 S STATELINE RD DRIGGS ID 83422	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 Member (circle one)	M. DEVEL HILL	2875 S. STATELINE RD	DRIGGS	ID	7270N	83422
Manager Member (circle one)						
Manager Member (circle one)						
Manager Member (circle one)						
Manager Member (circle one)						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 61228</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u>M Devel Hill</u></td> <td style="width: 30%;">Date: <u>3-4-11</u></td> </tr> <tr> <td>Name (type or print): <u>M. DEVEL HILL</u></td> <td>Title: <u>MEMBER</u></td> </tr> </table>	Signature: <u>M Devel Hill</u>	Date: <u>3-4-11</u>	Name (type or print): <u>M. DEVEL HILL</u>	Title: <u>MEMBER</u>
Signature: <u>M Devel Hill</u>	Date: <u>3-4-11</u>				
Name (type or print): <u>M. DEVEL HILL</u>	Title: <u>MEMBER</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM