No. <b>W 147774</b>		Due no later than Feb 28, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  RAFT RIVER SOD, LLC  MICHAEL D GARNER  22 N YALE RD  DECLO ID 83323		MICHAEL D GARNER 22 N YALE RD				
					DECLO ID 83323  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Na	ames and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	MICHAEL G		22 N YALE RD		DECLO	ID	USA	83323
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Amanda Andreason			Date: 12/22/2017			
W 147774		Name (type or print): Amanda Andreason			Title: Book-keeper			
Processed 12/22/2017 * Electronically provided signatures are accepted as original signatures.								