

No. W 15645		Due no later than Jun 30, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RAFT RIVER SOD TRANSPORT, LLC LYNN J STEADMAN 345 N. YALE RD. AMERICAN FALLS ID 83211 USA		LYNN J STEADMAN 345 N YALE RD. AMERICAN FALLS ID 83211			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name LYNN J STEADMAN	Street or PO Address 345 N. YALE RD.		City AMERICAN FALLS	State ID	Country USA	Postal Code 83211
5. Organized Under the Laws of: ID W 15645		6. Annual Report must be signed.* Signature: Lynn Steadman Name (type or print): Lynn Steadman Date: 04/18/2011 Title: Manager					
Processed 04/18/2011 * Electronically provided signatures are accepted as original signatures.							