No. W 11711 Return to:		Due no later than Apr 30, 2016 Annual Report Form		Registered Agent and Address (NO PO BOX) THOMAS J MAGAW				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MAGAW DISTRIBUTING, LLC TOM MAGAW 5461 US HWY 93 JEROME ID 83338			5461 US HWY 93 JEROME ID 83338 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	THOMAS J	MAGAW	5461		TWIN FALLS	ID		83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 11711		Signature: Tom Magaw			Date: 02/23/2016			
		Name (type or print): Tom Magaw			Title: Owner			
Processed 02/23/2016	Processed 02/23/2016 * Electronically provided signatures are accepted as original signatures.							