No. <b>W 12739</b> Return to:		Due no later than Aug 31, 2018  Annual Report Form		2. Registered A	Registered Agent and Address (NO PO BOX)     JACOB PATRICK MOORE			
				JACOB PATR				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  RLM RANCH, LLC  JACOB PATRICK MOORE  1263 W 4000 N  REXBURG ID 83440		1721 W. 4200 N. REXBURG ID 83440  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of a	at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER	JACOB PATRICK MOORE KRISTIN KAYE MOORE DOMAN		1721 W. 4200 N 14486 MONITOR MCKEE RD	REXBURG WOODBURN	ID OR		83440 97071	
Manager Manager	RONNIE C MOORE JUSTEN RAYE MOORE		1263 W. 4000 N. 1263 W 4000 N	REXBURG REXBURG	ID		83440 83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 12739		Signature: Jacob Moore			Date: 06/24/2018			
		Name (type or print): Jacob Moore		Title: Manager				
Processed 06/24/2018		* Electronically provide	ed signatures are accepted as original	l signatures.				