

No. W 26618	Due no later than Oct 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		LAWRENCE RINCOVER 6112 N HAZELBROOK LANE GARDEN CITY ID 83714			
	RIN-FLO, LLC LAWRENCE RINCOVER P O BOX 433 BOISE ID 83701-0433		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	LAWRENCE RINCOVER	1021 HARRISON BLVD	BOISE	ID	USA	83702
MEMBER	JENNIFER FLORES	4316 CAMPFIRE CT	MERIDIAN	ID	USA	83642
MEMBER	DAVID L FLORES	4316 CAMPFIRE CT	MERIDIAN	ID	USA	83642-0433
5. Organized Under the Laws of: ID W 26618	6. Annual Report must be signed.*					
		Signature: L. Rincover	Date: 08/10/2011			
		Name (type or print): L. Rincover	Title: Managing Partner			
Processed 08/10/2011		* Electronically provided signatures are accepted as original signatures.				