No. <b>W 50390</b>		Due no later than May 31, 2014		2. Reg	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			ALFONSO RIVAS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF		1. Mailing Address: Correct in this box if needed.  RIVAS BROTHERS TRUCKING, LLC  ALFONSO RIVAS  36 N CENTER ST  PO BOX 192  PARKER ID 83438		PAI	36 N CENTER ST PARKER ID 83438  3. New Registered Agent Signature:*				
RECEIVED BY DUE DATE									
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses of at	least one Member or Manager.						
Office Held	Name		Street or PO Address	City		State	Country	Postal Code	
MANAGER ALFONSO RI		IVAS	36 N CENTER ST	PARI	KER	ID	USA	83445	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID W 50390		Signature: Alfonso Rivas			Date: 04/11/2014				
		Name (type or print): Alfonso Rivas			Title: Owner				
Processed 04/11/2014 * Electronically provided signatures are accepted as original signatures.									