

No. W 6285	Due no later than Jun 30, 2001																					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		2. Registered Agent and Office NO PO BOX																			
	1. Mailing Address - Correct in this box, if applicable GROVE SPECIALTIES, LLC PAMELA S GROVE 200 E 37TH ST #3 2002 E 37th #1 BOISE, ID 83714		PAMELA S GROVE 200 E 37TH ST #3 BOISE, ID 83714 3. <u>New</u> Registered Agent Signature																			
4. Limited Liability Companies: Enter Names and Addresses of Managers.																						
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>mng</td> <td>Pamela S. Grove</td> <td>4586 N. marcliffe</td> <td>Boise</td> <td>ID</td> <td>83704</td> </tr> <tr> <td>mng</td> <td>Ronald D. Grove Jr</td> <td>4586 N. marcliffe</td> <td>Boise</td> <td>ID</td> <td>83704</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	mng	Pamela S. Grove	4586 N. marcliffe	Boise	ID	83704	mng	Ronald D. Grove Jr	4586 N. marcliffe	Boise	ID	83704
Office held	Name	Street or P.O. Address	City	State	Zip																	
mng	Pamela S. Grove	4586 N. marcliffe	Boise	ID	83704																	
mng	Ronald D. Grove Jr	4586 N. marcliffe	Boise	ID	83704																	
5. Organized Under the Laws of: IDAHO W 6285		6. Signature <u>Pamela S. grove</u> Date <u>6/6/01</u> Name (Typed or Printed) <u>Pamela S Grove</u> Title: <u>Mng</u>																				

Issued 04/02/2001

Do Not Tape or Staple

3736