

No. W 50390		Due no later than May 31, 2017		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		Annual Report Form		ALFONSO RIVAS 36 N CENTER ST PARKER ID 83438			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		RIVAS BROTHERS TRUCKING, LLC ALFONSO RIVAS 36 N CENTER ST PO BOX 192 PARKER ID 83438					
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	
MANAGER	ALFONSO RIVAS	36 N CENTER ST	PARKER	ID		83438	
MANAGER	JOSE A RIVAS	36 N CENTER ST	PARKER	ID	USA	83438	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 50390		Signature: Jose Rivas			Date: 04/13/2017		
		Name (type or print): Jose Rivas			Title: Manager		
Processed 04/13/2017		* Electronically provided signatures are accepted as original signatures.					