No. <b>W 113733</b>		Due no later than May 31, 2013		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JACKI COOKE 2301 W STATE HWY 31 VICTOR ID 83455  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SUMMERS LIVESTOCK LLC  DILLON SUMMERS  PO BOX 121  TROY ID 83871						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address	(	City	State	Country	Postal Code
MEMBER DILLON SUMMI		IMERS	PO BOX 121	7	ΓRΟΥ	ID	USA	83871
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Dillon Summers			Date: 04/04/2013			
W 113733		Name (type or print): Dillon Summers			Title: Owner			
Processed 04/04/2013 * Electronically provided signatures are accepted as original signatures.								