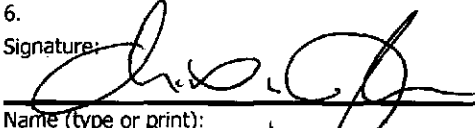


No. W 53729	Due no later than Aug 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. KNIGHT REFRIGERATED, LLC JENNIFER HOLMES Tax manager 20002 NORTH 19TH AVENUE PHOENIX AZ 85027-4250		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>David A. Jackson</td> <td>20002 N. 19th ave</td> <td>Phx, AZ</td> <td>USA</td> <td></td> <td>85027</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Adam W. Miller</td> <td>20002 N. 19th ave</td> <td>Phx, AZ</td> <td>USA</td> <td></td> <td>85027</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>							Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	David A. Jackson	20002 N. 19th ave	Phx, AZ	USA		85027	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Adam W. Miller	20002 N. 19th ave	Phx, AZ	USA		85027	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: ARIZONA W 53729		6. Signature:  Date: <u>10/23/17</u> Name (type or print): <u>David A. Jackson</u> Title: <u>Pres/CEO</u>																																				

Issued 10/23/2017 by online

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM