

No. W 81186	Due no later than Feb 28, 2013 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. INTERMOUNTAIN TRUCK LEASING, LLC KIMBERLY ALLEN 599 BOXWOOD DR TWIN FALLS ID 83301		KIMBERLY ALLEN 599 BOXWOOD DR TWIN FALLS ID 83301			
			3. <u>New</u> Registered Agent Signature:*			
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
MEMBER	KIMBERLY ALLEN	599 BOXWOOD DRIVE	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID W 81186		6. Annual Report must be signed.* Signature: Kimberly Allen Name (type or print): Kimberly Allen Date: 01/31/2013 Title: Member				
Processed 01/31/2013		* Electronically provided signatures are accepted as original signatures.				