

No. W 64099	Due no later than Jun 30, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) PAT FUNKHOUSER 700 W 250 N FAIRFIELD ID 83327
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. FUNKHOUSER HAYSTACKING, LLC PO BOX 201 FAIRFIELD ID 83327		3. <u>New</u> Registered Agent Signature.

4. **Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Pat Funkhouser	Box 201	Fairfield Id.			83327
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Connie Funkhouser	"	"	"	"	"
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 64099 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u>Pat Funkhouser</u> </td> <td style="width: 40%;"> Date: <u>May 22-13</u> </td> </tr> <tr> <td> Name (type or print): <u>PAT Funkhouser</u> </td> <td> Title: <u>owner</u> </td> </tr> </table>	Signature: <u>Pat Funkhouser</u>	Date: <u>May 22-13</u>	Name (type or print): <u>PAT Funkhouser</u>	Title: <u>owner</u>
Signature: <u>Pat Funkhouser</u>	Date: <u>May 22-13</u>				
Name (type or print): <u>PAT Funkhouser</u>	Title: <u>owner</u>				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM