| No. W 100142 | | Due no later than Feb 29, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|------------------------|---|--|---|--|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. GENTILLON-COLVIN FARM, LLC ALAN GENTILLON 604 E 925 N | | ALAN GENTILLION 604 E 925 N FIRTH ID 83236-1154 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | 83236-1154 | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Comp | oanies: Enter Nar | mes and Addres | sses of at least one Member or Manager | r. | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| MANAGER | IANAGER ALAN GENTILLON | | 604E 925N | | FIRTH | ID | USA | 83236-1154 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Alan Gentillon | | Date: 03/09/2016 | | | | |
| W 100142 | | Name (type or print): Alan Gentillon | | | Title: Manager/Registered Agent | | | |
| Processed 03/09/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |