

No. W 38099		Due no later than Apr 30, 2017 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		1. Mailing Address: Correct in this box if needed. PMI NUTRITION, LLC LAW DEPARTMENT MS 2500 PO BOX 64101 ST PAUL MN 55164-0101		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name PURINA MILLS LLC	Street or PO Address 1080 COUNTY RD F W		City SHOREVIEW	State MN	Country	Postal Code 55126
5. Organized Under the Laws of: DE W 38099	6. Annual Report must be signed.* Signature: Katherine Lichy Name (type or print): Katherine Lichy Date: 04/18/2017 Title: Asst. Secretary						
Processed 04/18/2017 * Electronically provided signatures are accepted as original signatures.							