No. W 62364		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form 1. Mailing Address: Correct in this box if needed. WINDY RIDGE ALPACA FARM, L.L.C. DIANE JOHNSON 1552 SANCTUARY LANE HOMEDALE ID 83628		LYNN JOHNSON 1552 SANCTUARY LANE HOMEDALE ID 83628					
SECRETARY OF STATE								
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
			3. New Registered Agent Signature:*					
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Name	Street or P	O Address	City	State	Country	Postal Code		
MANAGER LYNN JC		TUARY LANE	HOMEDALE	ID		83628		
MANAGER DIANE J	DHNSON 1552 SANC	TUARY LANE	HOMEDALE	ID		83628		
5. Organized Under the Laws of:	6. Annual Report must be signed.*	6. Annual Report must be signed.*						
ID ID	Signature: Diane Johnson	Signature: Diane Johnson			Date: 04/22/2016			
W 62364	Name (type or print): Diane Johns	Title: Secretary/Treasurer						
Processed 04/22/2016	* Electronically provided signatures are accepted as original signatures.							