

No. W 138227		Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. B&R FARMS LLC BRUCE TONKS 4675 N 2000 W TETONIA ID 83452		BRUCE TONKS 4675 N 2000 W TETONIA ID 83452	
REINSTATEMENT FEE DUE: \$30.00				3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name <i>Bruce Tonks</i>	Street or PO Address <i>4675 N 2000 W</i>	City <i>Teton</i>	State <i>Ida</i>	Country <i>Teton</i> Postal Code <i>83452</i>
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of: IDAHO W 138227		6. Signature:  Name (type or print): <i>Bruce Tonks</i>		Date: <i>10-18-16</i> Title:	
Issued 09/14/2016 by DKL					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.