

No. W 86299	Due no later than Aug 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MYRON A EARLEY 639 EARLEY RD OVID ID 83254
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. EARLEY FARM, LLC 639 EARLEY RD OVID ID 83254		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"/> <i>Myron Earley 639 Earley Rd. Ovid, ID. Bear Lake 83254</i>			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Kathryn Watkins 1764 Indep. Blvd. S.L.C. Wah Satt Lake 84116</i>			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Karen Rae Webb P.O Box 136 Paris ID. Bear Lake 84261</i>			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Treena Roberts P.O Box 522 Grace ID. Caribou 83241</i>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 86299 </div>		6. Signature: <i>Myron A. Earley</i> <div style="border-bottom: 1px solid black; width: 150px; margin-top: 5px;"> <i>Myron Earley</i> </div> Name (type or print): <div style="text-align: right; margin-top: 10px;"> Date: <i>9-15-2017</i> <div style="border-bottom: 1px solid black; width: 100px; margin-top: 5px;"> <i>Manager</i> </div> Title: </div>	
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