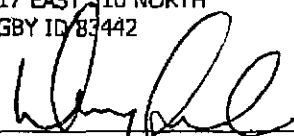
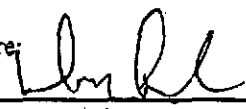


<p>No. <b>W 101496</b></p>		<p><b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/12/2015</b></p>		<p><b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> DOUG LANDON 3817 EAST 310 NORTH RIGBY ID 83442</p>																																				
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>		<p><b>1. Mailing Address; Correct in this box if needed.</b> 4B&amp;G LIVESTOCK LLC DOUG LANDON 3817 EAST 310 NORTH RIGBY ID 83442</p>		<p></p>																																				
<p><b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b></p>				<p><b>3. New Registered Agent Signature.</b></p>																																				
<p><b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b></p> <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Doug Landon</td> <td>4172 E. 176 N</td> <td>Rigby</td> <td>ID</td> <td></td> <td>83442</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Doug Landon	4172 E. 176 N	Rigby	ID		83442	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p><b>5. Organized Under the Laws of:</b>  IDAHO W 101496</p>		<p><b>6.</b></p> <p>Signature: </p> <p>Date: <u>3/10/16</u></p> <p>Name (type or print): <u>DOUG Landon</u></p> <p>Title: <u>manager</u></p>																																						

Issued 03/10/2016 by TLB

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**