

No. <b>W 11674</b>	Due no later than Apr 30, 2015 <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> WADE G HARRIS 13895 NOUNAN RD SODA SPRINGS ID 83276																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> EIGHT MILE RANCH, L.L.C. C MCGEE HARRIS 1501 EIGHT-MILE CREEK ROAD SODA SPRINGS ID 83276 USA <i>change to:</i> <b>Eight Mile Ranch, LLC</b> <b>13895 Nounan Rd</b> <b>Soda Springs, ID 83276</b>		3. <b>New Registered Agent Signature.</b> <i>Wade G Harris</i>																																			
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 20%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>C McGee Harris</td> <td>13895 Nounan Rd</td> <td>Soda Springs</td> <td>ID</td> <td>USA</td> <td>83276</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Wade G Harris</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Janet G Harris</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 checked="" type="checkbox"/>	C McGee Harris	13895 Nounan Rd	Soda Springs	ID	USA	83276	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Wade G Harris						Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Janet G Harris						Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 11674</b> </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  <i>Wade G Harris</i> </td> <td style="width: 40%;">           Date:  <b>6-10-15</b> </td> </tr> <tr> <td>           Name (type or print):  <b>Wade G Harris</b> </td> <td>           Title:  <b>Member</b> </td> </tr> </table>		Signature: <i>Wade G Harris</i>	Date: <b>6-10-15</b>	Name (type or print): <b>Wade G Harris</b>	Title: <b>Member</b>																															
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