| No. W 157829 Return to: | | Due no later than Oct 31, 2016 Annual Report Form | | | Registered Agent and Address (NO PO BOX) PAM HOLLOWAY | | | |
|--|---|--|--------------------------------|------------------|--|---------|-------------|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. SOSONI FARM, LLC 1000 WATT RD DEARY ID 83823 | | DEARY ID | 1000 WATT RD DEARY ID 83823 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compar | nies: Enter Nai | mes and Addresses of a | t least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | DOUGLAS G | LENN HOLLOWAY | 1000 WATT ROAD | DEARY | ID | USA | 83823 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Douglas | | Date: 11/17/2016 | | | | |
| W 157829 | | Name (type or print | | Title: Officer | | | | |
| Processed 11/17/2016 | rocessed 11/17/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | |