| No. W 26895 | | Due no later than Nov 30, 2017 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|---|----------------------|---|--|---------|-------------|--|
| Return to: | | Annual Report Form | | 10 March 2011 - | CANDACE JEAN ATKINS | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. C.C. ATKINS, LLC CANDACE JEAN ATKINS 1505 LUCILLE AVE. FRUITLAND ID 83619-2328 | | FRUITLAND | 1505 LUCILLE AVE. FRUITLAND ID 83619-2328 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER CANDACE JE/ | | AN ATKINS | 1505 LUCILLE AVE. | FRUITLAND | ID | | 83619-2328 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 26895 | | Signature: cookieatkins | | I | Date: 10/10/2017 | | | |
| | | Name (type or | - | Title: farmmanager | | | | |
| Processed 10/10/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |