No. <b>W 21588</b>		Due no later than Nov 30, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  DEVON WEBER FARMS, LLC DEVON WEBER  905 CREEKSIDE AVE FILER ID 83328	905 CREEKS FILER ID 8	DEVON WEBER 905 CREEKSIDE AVE FILER ID 83328  3. New Registered Agent Signature:*		
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Fater Nar		mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	DEVON WEE	ER 100 S 159 E	BURLEY	ID		83318
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: DeVon Weber Date: 12/30/2016				
ID W 21588		Signature: DeVon Weber Name (type or print): DeVon Weber	Title: Manager			
Processed 12/30/2016 * Electronically provided signatures are accepted as original signatures.						