

No. W 35139	Due no later than Dec 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		WADE A SIMONS 1031 UTT LANE PRINCETON ID 83857-9755			
	SIMONS FARMS, LLC WADE A SIMONS 1031 UTT LANE PRINCETON ID 83857-9755 USA		3. <u>New</u> Registered Agent Signature:*			
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
MEMBER	EDITH W SIMONS	1031 UTT LN	PRINCETON	ID	USA	83857-9755
MANAGER	WADE A SIMONS	1031 UTT LN	PRINCETON	ID	USA	83857-9755
5. Organized Under the Laws of: ID W 35139	6. Annual Report must be signed.* Signature: Wade A Simons Name (type or print): Wade A Simons		Date: 12/20/2016 Title: Manager			
Processed 12/20/2016		* Electronically provided signatures are accepted as original signatures.				