

|  |                 |   |          |  |         |                                  |  |
|--|-----------------|---|----------|--|---------|----------------------------------|--|
| No. <b>W 120728</b>  |                 | <b>Due no later than Jan 31, 2015</b>   |          | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>CRAZY HEIFER LIVESTOCK, LLC<br>CHRISTIE J WOOD- GUMB<br>23517 ODE LANE<br>CALDWELL ID 83607<br>USA |          | CHRISTIE WOOD<br>23517 ODE LANE<br>CALDWELL 83607  |         |                                  |  |
|  |                 |   |          | 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   | CHRISTIE J WOOD | 23517 ODE LN  | CALDWELL | ID   | USA     | 83607                            |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 120728</b>  |                 | 6. Annual Report must be signed.*<br>Signature: Christie Wood Gumb<br>Name (type or print): Christie Wood Gumb  |          |  |         | Date: 03/02/2015<br>Title: Owner |  |
| Processed 03/02/2015   |                 | * Electronically provided signatures are accepted as original signatures.   |          |  |         |                                  |  |