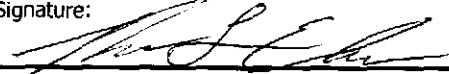


No. <b>C 97658</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/26/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> <i>Thomas</i> <b>TOMAS L ERIKSON</b> 630 TAURUS DR REXBURG ID 83440																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> ERIKSON FARMS, INC. STAN ERIKSON 2480 SOUTH 1400 WEST REXBURG ID 83440																							
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td><i>President</i></td> <td><i>Stan Erikson</i></td> <td><i>2480 S. 1400 W.</i></td> <td><i>Rexburg</i></td> <td><i>ID</i></td> <td><i>US</i></td> <td><i>83440</i></td> </tr> <tr> <td><i>Vice President</i></td> <td><i>Tom Erikson</i></td> <td><i>630 Taurus Dr</i></td> <td><i>Rexburg</i></td> <td><i>ID</i></td> <td><i>US</i></td> <td><i>83440</i></td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	<i>President</i>	<i>Stan Erikson</i>	<i>2480 S. 1400 W.</i>	<i>Rexburg</i>	<i>ID</i>	<i>US</i>	<i>83440</i>	<i>Vice President</i>	<i>Tom Erikson</i>	<i>630 Taurus Dr</i>	<i>Rexburg</i>	<i>ID</i>	<i>US</i>	<i>83440</i>	3. <u>New</u> Registered Agent Signature.
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>C 97658</b>	6. Signature:  Date: <i>6-4-15</i> Name (type or print): <i>Thomas L Erikson</i> Title: <i>VP</i>																							

Issued 06/04/2015 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

1. Fill out this form for each corporation or partnership that is organized under the laws of Idaho. Pay special attention to the mailing address. If the