

No. W 61306		Due no later than Apr 30, 2018		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. CWS FARMS LLC BRYAN SEARLE PO BOX H SHELLEY ID 83274		JARED WATTENBARGER 640 S STATE ST SHELLEY ID 83274		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	SCOTT SEARLE	959 E 1400 N	SHELLEY	ID		83274	
MEMBER	BRYAN SEARLE	538 EAST 1250 NORTH	SHELLEY	ID		83274	
MEMBER	BART WATTENBARGER	1296 NORTH 950 EAST	SHELLEY	ID		83274	
5. Organized Under the Laws of: ID W 61306		6. Annual Report must be signed.* Signature: Bryan Searle Name (type or print): Bryan Searle Date: 02/27/2018 Title: member					
Processed 02/27/2018		* Electronically provided signatures are accepted as original signatures.					