

No. W 110276	Due no later than Jan 31, 2013 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. S AND A FARMS, LIMITED LIABILITY COMPANY SHAUN CRAPO 1733 E 300 N ST ANTHONY ID 83445		SHAUN CRAPO 1733 E 300 N ST ANTHONY ID 83445			
			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	ALYNN CRAPO	1733 EAST 300 NORTH	ST. ANTHONY	ID	USA	83445
5. Organized Under the Laws of: ID W 110276		6. Annual Report must be signed.* Signature: Shaun crapo Name (type or print): Shaun crapo		Date: 02/11/2013 Title: Manager		
Processed 02/11/2013		* Electronically provided signatures are accepted as original signatures.				