

No. W 165329		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		1. Mailing Address: Correct in this box if needed. SIMPSON FARMING, LLC LONNIE SIMPSON 8427 CAVENDISH HWY LENORE ID 83541		LONNIE SIMPSON 8427 CAVENDISH HWY LENORE ID 83541			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name LONNIE EVAN SIMPSON	Street or PO Address 8427 CAVENDISH HWY		City LENORE	State ID	Country USA	Postal Code 83541-5088
5. Organized Under the Laws of: ID W 165329		6. Annual Report must be signed.* Signature: Lonnie E Simpson Name (type or print): Lonnie E Simpson Date: 04/03/2018 Title: Manager					
Processed 04/03/2018 * Electronically provided signatures are accepted as original signatures.							