

<b>No. W 109739</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b>  ROBERT W OLSEN 21 E 100 N BLACKFOOT ID 83221																																			
<b>Return to:</b> SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>1. Mailing Address: Correct in this box if needed.</b> RICH LANE FARMS, LLC 21 E 100 N BLACKFOOT ID 83221		<b>3. <u>New</u> Registered Agent Signature.</b>																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Robert Olsen</td> <td>21 E 100 N</td> <td>Blackfoot</td> <td>ID</td> <td>Bingham</td> <td>83221</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Robert Olsen	21 E 100 N	Blackfoot	ID	Bingham	83221	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  IDAHO W 109739		<b>6.</b> <table border="1"> <tr> <td>Signature: <u>Robert W. Olsen</u></td> <td>Date: <u>9/17/2013</u></td> </tr> <tr> <td>Name (type or print): <u>Robert Olsen</u></td> <td>Title: <u>manager</u></td> </tr> </table>		Signature: <u>Robert W. Olsen</u>	Date: <u>9/17/2013</u>	Name (type or print): <u>Robert Olsen</u>	Title: <u>manager</u>																															
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# INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM