

No. W 124817		Due no later than Apr 30, 2016		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. PALOUSE GROWN MARKET LLC HOLLY COLEMAN PO BOX 372 TROY ID 83871		HOLLY COLEMAN 314 S PINE ST TROY ID 83871			
				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	
MANAGER	MATTHEW NELS ERICKSON	314 S PINE ST.	TROY	ID	USA	83871-0372	
5. Organized Under the Laws of: ID W 124817		6. Annual Report must be signed.* Signature: Holly Coleman Name (type or print): Holly Coleman Date: 04/11/2016 Title: Registered Agent					
Processed 04/11/2016		* Electronically provided signatures are accepted as original signatures.					