No. W 2099		Due	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			RUSSELL O JOHNSON 13447 N HAWTHORNE RD POCATELLO ID 83202 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JOHNSONS' CEDAR MOUNTAIN FARMS, LLC RUSSELL O JOHNSON 13104 W TYHEE RD POCATELLO ID 83202-5112		POCATELLO				
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Register				
4. Limited Liability Cor	mpanies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER RUSSELL O JOHNSON MEMBER GARY R JOHNSON			13447 N HAWTHORNE RD 9108 W 2 1/2 MILE RD	POCATELLO POCATELLO	ID ID		83202 83202	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 2099		Signature: Russell O. Johnson		[Date: 01/06/2016			
		Name (type or	٦	Title: Owner, Partner				
Processed 01/06/2016	5	* Electronically pr	ovided signatures are accepted as origina	al signatures.				