

|  |                  |  |          |   |         |             |  |
|--|------------------|--|----------|---|---------|-------------|--|
| No. <b>W 110950</b>  |                  | <b>Due no later than Feb 28, 2015</b>  |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>  |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>GR FARMS, LLC<br>MICHELE LAWSON<br>8746 SNAKE LANE<br>CALDWELL ID 83607       |          | MICHELE LAWSON<br>8746 SNAKE LANE<br>CALDWELL 83607 |         |             |  |
|  |                  |  |          | 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   | RICHARD D LAWSON | 8746 SNAKE LANE  | CALDWELL | ID  | USA     | 83607       |  |
| MANAGER  | MICHELE L LAWSON | 8746 SNAKE LANE  | CALDWELL | ID  | USA     | 83607       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 110950</b>  |                  | 6. Annual Report must be signed.*<br>Signature: michele Lawson<br>Name (type or print): michele Lawson<br>Date: 03/18/2015<br>Title: manager's |          |   |         |             |  |
| Processed 03/18/2015   |                  | * Electronically provided signatures are accepted as original signatures.  |          |   |         |             |  |