

|                                                                                                                                                        |                  |                                                                                      |       |                                                            |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|-------|------------------------------------------------------------|------------------|-------------|--|
| No. <b>W 138860</b>                                                                                                                                    |                  | <b>Due no later than Jun 30, 2016</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>Annual Report Form</b>                                                            |       | T CLARK ROBINSON<br>3458 S RUSTLER PL<br>MERIDIAN ID 83642 |                  |             |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b>                            |       | 3. <u>New</u> Registered Agent Signature:*                 |                  |             |  |
|                                                                                                                                                        |                  | IDAHO LAND & CATTLE COMPANY LLC<br>T CLARK ROBINSON<br>PO BOX 1942<br>NAMPA ID 83653 |       |                                                            |                  |             |  |
| 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                                                                                                                                                | T CLARK ROBINSON | PO BOX 1942                                                                          | NAMPA | ID                                                         | USA              | 83653       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                    |       |                                                            |                  |             |  |
| <b>ID<br/>W 138860</b>                                                                                                                                 |                  | Signature: clark robinson                                                            |       |                                                            | Date: 04/25/2016 |             |  |
|                                                                                                                                                        |                  | Name (type or print): clark robinson                                                 |       |                                                            | Title: manager   |             |  |
| Processed 04/25/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.            |       |                                                            |                  |             |  |