No. <b>W 82377</b>		Due no later than Mar 31, 2014	2. F	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed  SPRING HOLLOW FARM, LLC  JOHN COLEMAN  PO BOX 1293  TWIN FALLS ID 83303-1293	d	JOHN A COLEMAN 401 GOODING ST #201 TWIN FALLS ID 83303  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	Ci	ity	State	Country	Postal Code	
MEMBER LESLIE TAYI		LOR PO BOX 1293	Τ\	WIN FALLS	ID	USA	83303-1293	
5. Organized Under the Laws of:  ID  W 82377		6. Annual Report must be signed.* Signature: John Coleman Name (type or print): John Coleman		Date: 02/15/2014 Title: Agent				
Processed 02/15/2014 * Electronically provided signatures are accepted as original signatures.								