| No. W 62995 | | Du | 2. Registered Age | 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. FREEMAN LAND & INVESTMENT, LLC GARY E FREEMAN 4359 N PINE FEATHERVILLE RD | | 810 S TWIN P PINE ID 8364 | GARY E FREEMAN 810 S TWIN PINE DR PINE ID 83647 3. New Registered Agent Signature:* | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Co Office Held | ompanies: Enter Na Name | mes and Addresse | es of at least one Member or Manager. Street or PO Address | City | State | Country | Postal Code |
| MEMBER GARY E FREEM MEMBER DENISE H FREE | | | 4359 N PINE FEATHERVILLE RD 4359 N PINE FEATHERVILLE RD | FEATHERVILLE FEATHERVILLE | ID ID | country | 83647 83647 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Ga | | Date: 03/20/2018 | | | |
| W 62995 | | Name (type o | | Title: Member | | | |
| Processed 03/20/20: | 18 | * Electronically p | rovided signatures are accepted as original s | signatures. | | | |