No. **W 134000**	**Due no later than Feb 28, 2018** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** DRY CREEK FARMS, LLC JOHN SAILI 78 DRY CREEK RD CAREY ID 83320	JOHN SAILI 78 DRY CREEK RD CAREY ID 83320-8332 3. New 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	JOHN R SAILI	78 DRY CREEK ROAD	CAREY	ID	USA	83320
MEMBER	BRYAN L WOOD	24 CIRCLE DRIVE	CAREY	ID	USA	83320

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 134000**	Signature: John R Saili	Date: 12/29/2017
	Name (type or print): John R Saili	Title: Co Owner

Processed 12/29/2017

* Electronically provided signatures are accepted as original signatures.