No. <b>W 17511</b>		Due no later than Dec 31, 2014	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.	KENEA LEAVITT 220 NORTH 740 WEST BLACKFOOT 83221  3. New Registered Agent Signature:*				
		KENEA LEAVITT FARMS LLC KENEA LEAVITT 220 NORTH 740 WEST BLACKFOOT ID 83221					
NO FILING FEE IF RECEIVED BY DUE DATE							
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 KENEA LEAV		/ITT 220 NORTH 740 WEST	BLACKFOOT	ID		83221	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: KENA LEAVITT	Date: 10/27/2014				
W 17511		Name (type or print): KENA LEAVITT	Title: MEMBER				
Processed 10/27/2014	rocessed 10/27/2014 * Electronically provided signatures are accepted as original signatures.						