

No. <b>W 61306</b>		<b>Due no later than Apr 30, 2017</b>		<b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  CWS FARMS LLC BRYAN SEARLE PO BOX H SHELLEY ID 83274		JARED WATTENBARGER 640 S STATE ST SHELLEY ID 83274		3. <u>New</u> 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	SCOTT SEARLE	959 E 1400 N	SHELLEY	ID		83274	
MEMBER	BRYAN SEARLE	538 EAST 1250 NORTH	SHELLEY	ID		83274	
MEMBER	BART WATTENBARGER	1296 NORTH 950 EAST	SHELLEY	ID		83274	
5. Organized Under the Laws of:  <b>ID W 61306</b>		6. Annual Report must be signed.* Signature: Scott Searle Name (type or print): Scott Searle  Date: 02/24/2017 Title: member					
Processed 02/24/2017		* Electronically provided signatures are accepted as original signatures.					