No. **W 34255**	**Due no later than Oct 31, 2015** **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.** MAGIC VALLEY LIVESTOCK FEED, LLC DAVE L SNELSON 323 CLEAR LAKE LANE BUHL ID 83316 USA	DAVID SNELSON 323 CLEAR LAKE LANE BUHL ID 83316 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	LUIS M BETTENCOURT	PO BOX 587	JEROME	ID		83338-0587
MEMBER	DAVID M SNELSON	1246 E 2500 N	BUHL	ID		83316
MEMBER	JOHN GOMEZ	1776 E 4500 N	BUHL	ID	USA	83316

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 34255**	Signature: Dave Snelson	Date: 09/16/2015
	Name (type or print): Dave Snelson	Title: member

Processed 09/16/2015

* Electronically provided signatures are accepted as original signatures.