No. W 61514 Return to:		Due no later than Apr 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. FALL RIVER FARMS, LLC DUANE R GRANT 707 E 600 N RUPERT ID 83350 USA		2. Registered Agent and Address (NO PO BOX) DUANE GRANT				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				_	707 E 600 N RUPERT ID 83350 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	DUANE R GRANT		707 E 600 N		RUPERT	ID	USA	83350
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Duane R. Grant			Date: 03/16/2017			
W 61514		Name (type or print): Duane R. Grant			Title: Manager			
Processed 03/16/2017 * Electronically provided signatures are accepted as original signatures.								