

No. W 88373	Due no later than Nov 30, 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. NORTH END ORGANIC NURSERY, LLC LINDSAY SCHRAMM 3777 W CHINDEN BLVD GARDEN CITY ID 83714	LINDSAY SCHRAMM 3777 W CHINDEN BLVD GARDEN CITY ID 83714			
		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	LINDSAY SCHRAMM	3777 W CHINDEN BLVD	GARDEN CITY	ID	USA 83714
5. Organized Under the Laws of: ID W 88373	6. Annual Report must be signed.* Signature: Lindsay Schramm Date: 09/18/2015 Name (type or print): Lindsay Schramm Title: Member/Owner				
Processed 09/18/2015		* Electronically provided signatures are accepted as original signatures.			