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| No. W 5424 | Due no later than Jan 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. OPALINE AQUA FARM, L.L.C. SHARON E CUNNINGHAM 9347 FISH POND LANE MELBA ID 83641 | SHARON E CUNNINGHAM 9347 FISH POND LANE MELBA ID 83641 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 |
| MANAGER | SHARON CUNNINGHAM | HC 79 BOX 100 | MELBA | ID | | 83641 |
| MANAGER | RICHARD R. CUNNINGHAM | HC 79 BOX 100 | MELBA | ID | | 83641 |
| MANAGER | CHARLOTTE E. ALEXANDER | HC 79 BOX 725 | MELBA | ID | | 83641 |
| 5. Organized Under the Laws of: ID W 5424 | 6. Annual Report must be signed.* Signature: Charlotte E. Alexander Name (type or print): Charlotte E. Alexander | | Date: 03/31/2016 Title: Manager | | | |
| Processed 03/31/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |