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| No. W 61306 | | Due no later than Apr 30, 2013 | | 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. CWS FARMS LLC STEVE CHRISTENSEN PO BOX H SHELLEY ID 83274 | | STEVE CHRISTENSEN 1039 EAST 1400 NORTH 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 | STEVE CHRISTENSEN | 1039 EAST 1400 NORTH | SHELLEY | ID | USA | 83274 | |
| MEMBER | SCOTT SEARLE | 959 E 1400 N | SHELLEY | ID | USA | 83274 | |
| MEMBER | BRYAN SEARLE | 538 EAST 1250 NORTH | SHELLEY | ID | USA | 83274 | |
| MEMBER | BART WATTENBARGER | 1296 NORTH 950 EAST | SHELLEY | ID | USA | 83274 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 61306 | | Signature: Bryan Searle | | | | Date: 02/14/2013 | |
| | | Name (type or print): Bryan Searle | | | | Title: Member | |
| Processed 02/14/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |