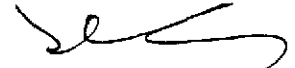





No. W 165372	Reinstatement Annual Report Form ADMIN DISSOLVED 07/26/2017		2. Registered Agent and Office (NOT A P.O. BOX) JULIE FOX 891 FOXMOOR HAILEY ID 83333																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. FOX ACRES FARMS LLC JULIE FOX PO BOX 116 HAILEY ID 83333		3. <u>New</u> Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>John Fox</td> <td>P.O. Box 116</td> <td>Hailey</td> <td>ID</td> <td>USA</td> <td>83333</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Julie Fox</td> <td>P.O. Box 116</td> <td>Hailey</td> <td>ID</td> <td>USA</td> <td>83333</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	John Fox	P.O. Box 116	Hailey	ID	USA	83333	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Julie Fox	P.O. Box 116	Hailey	ID	USA	83333	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 165372 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>10/8/17</u> </td> </tr> <tr> <td> Name (type or print): <u>Julie Fox</u> </td> <td> Title: <u>Manager</u> </td> </tr> </table>		Signature: 	Date: <u>10/8/17</u>	Name (type or print): <u>Julie Fox</u>	Title: <u>Manager</u>																															
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