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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------|---------------------|
| No. <b>W 37549</b>                                                                                                                                     |                 | <b>Due no later than Mar 31, 2016</b>                                                                                                                                  |             | <b>2. Registered Agent and Address (NO PO BOX)</b>    |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>A & A FARMS, LLC<br>ANTHONY M HAFEN<br>PO BOX 943<br>EMMETT ID 83617 |             | ANTHONY M HAFEN<br>1051 MELROSE DR<br>EMMETT ID 83617 |                     |
|                                                                                                                                                        |                 |                                                                                                                                                                        |             | 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                                                                                                                                                 | ASHLEY P HAFEN  | 1263 W MILLBRIDGE LN                                                                                                                                                   | W BOUNTIFUL | UT                                                    | 84087               |
| MEMBER                                                                                                                                                 | ANTHONY M HAFEN | 1015 MELROSE DR                                                                                                                                                        | EMMETT      | ID                                                    | 83617               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 37549</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Anthony Hafen<br>Name (type or print): Anthony Hafen<br>Date: 01/25/2016<br>Title: Member                              |             |                                                       |                     |
| Processed 01/25/2016                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                              |             |                                                       |                     |