No. **W 4728**	**Due no later than Sep 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.** FARMS, LLC BRAD H HALL PO BOX 50620 IDAHO FALLS ID 83405	SHAWN D BOYLE 3875 S AMERICAN WAY IDAHO FALLS ID 83402 3. New 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	BRAD H HALL	2840 SUNNYBROOK LN	IDAHO FALLS	ID		83404
MANAGER	ANDREA P HALL	2840 SUNNYBROOK LN	IDAHO FALLS	ID		83404

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 4728**	Signature: Shawn Boyle	Date: 07/24/2015
	Name (type or print): Shawn Boyle	Title: Agent

Processed 07/24/2015

* Electronically provided signatures are accepted as original signatures.