No. W 56320		Due no later than Nov 30, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		[TIMOTHY J KELLY 1867 N FIREBRICK DR KUNA ID 83634 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DAD'S GLUTEN-FREE PRODUCTS LLC TIMOTHY J KELLY 1867 N FIREBRICK DR KUNA ID 83634						
NO FILING FEE IF RECEIVED BY DUE DATE		NOWA ID 03031			or <u></u>		gaa	
4. Limited Liability Companie	es: Enter Nar	nes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
	TIMOTHY J KELLY TARA S KELLY		1867 N FIREBRICK DR 1867 N FIREBRICK DR		Kuna Kuna	ID ID	USA USA	83634 83634
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 56320		Signature: Timothy J Kelly			Date: 09/08/2010			
		Name (type or print): Timothy J Kelly			Title: Member			
Processed 09/08/2010 * Electronically provided signatures are accepted as original signatures.								