

|                                                                                                                                                        |                  |                                                                                                                                                   |         |                                                       |         |                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------------------------------------------------|---------|----------------------|--|
| No. <b>W 121793</b>                                                                                                                                    |                  | <b>Due no later than Feb 28, 2017</b>                                                                                                             |         | 2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b><br><br>UVENTA LAND & HOLDINGS, LLC<br>CELESTE WALKER<br>256 N 2ND E<br>REXBURG ID 83440 |         | BARRY J PETERSON<br>3342 W 4000 N<br>REXBURG ID 83440 |         |                      |  |
|                                                                                                                                                        |                  |                                                                                                                                                   |         | 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                                                                                                                                                 | BARRY J PETERSON | 3342 W 4000 N                                                                                                                                     | REXBURG | ID                                                    | USA     | 83440                |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                 |         |                                                       |         |                      |  |
| <b>ID<br/>W 121793</b>                                                                                                                                 |                  | Signature: Celeste Walker                                                                                                                         |         |                                                       |         | Date: 12/22/2016     |  |
|                                                                                                                                                        |                  | Name (type or print): Celeste Walker                                                                                                              |         |                                                       |         | Title: Administrator |  |
| Processed 12/22/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                         |         |                                                       |         |                      |  |