SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 PO BOX 83720 PO BOX 83720-0080 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mailing Address: Correct in this box if needed. WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 I. Mew Registered Agent Signature. I. Mailing Address: Correct in this box if needed. WAMPA ID 83686 I. Mew Registered Agent Signature. I. Member Signature. I. Mailing Address: Correct in this box if needed. WAMPA ID 83686 I. Mew Registered Agent Signature. I. Member Signature. I. Mailing Address: Correct in this box if needed. WAMPA ID 83686 I. Mew Registered Agent Signature. I. Member Signature. I. Mailing Address: Correct in this box if needed. WAMPA ID 83686 I. Mew Registered Agent Signature. I. Member Signature. II Memb	No. W 60598	Due no later than Mar 31, 2013	2. Registered Agent and Office
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager Member Organized Under the Laws of: IDAHO W 60598 WIND DAIRY, LLC 12306 WHITECHAPEL WAY NAMPA ID 83686 12306 WHITECHAPEL WAY NAMPA ID 83686 12306 WHITECHAPEL WAY NAMPA ID 83686 3. New Registered Agent Signature. Name Steet of PO Address City State County Stat		Annual Report Form	(NOT A P.O. BOX)
A. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager Member Softwwww. 12 30 6 WHITE CHAPEL WAY NAMPA 3D 454 83636 Manager Member . Man	450 N 4th STREET PO BOX 83720	WIND DAIRY, LLC 12306 WHITECHAPEL WAY	12306 WHITECHAPEL WAY
Manager Member Softwww. 12306 WHITE CHAPEL WAY NAMPASO WAS 3636 Manager Member Member Member Member Member Manager Member Manager Member Member Manager Member Member Member Member Member Manager Member Me	RECEIVED BY DUE		3. New Registered Agent Signature.
Manager Member 6. Organized Under the Laws of: IDAHO W 60598 Ame (type or print): Title:	E-THEOLOG MADS BAK		73 OIT MEMBERS SAA Instructions
Organized Under the Laws of: IDAHO W 60598 Organized Under the Laws of: Signature: Out	Manager Wember	SOHNWIND- 12306 WHITE CHAPEL W	State County State County VRY-NAMPA, 3D-USA-83686
V 60598 Signature: Volumber Ce Date: 4-19-13 Name (type or print): Title:	Manager Member 4	SOHNWIND-12306 WHITE CHAPEL W	State country Scale Code VM Y-NAMPA SD-M SA-8 3686
W 60598 Name (type or print): Title:	Manager Member Manager Member	SOHNWIND-12306 WHITE CHAPEL W	State county Scale County State County State County State County State County State State County State
Title:	Manager Member Manager Member	SOHNWIND. 12306 WHITE CHAPEL W	State country Foods Code WAY-NAMPA SD-WSA-83686
1ed 04/17/2013 by CLH MANGE ER	Manager Member Manager Member Manager Member Member Manager Member Member Manager Member Memb	SOHNWIND. 12306 WHITE CHAPEL W	URY-NAMPASD-484-83686
	Manager Member Manager Member Manager Member Member Manager Member Member Manager Member Memb	SOHNWIND. 12306 WHITE CHAPEL W Sof: 6. Signature: Juliu Que Que Name (type or print):	Date: 4-19-13

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office