| No. <b>C 138362</b> Return to:   |                                | Due no later than Mar 31, 2013 Annual Report Form  1. Mailing Address: Correct in this box if needed.  VALLIVUE FARMS, INC. DEAN NIELSEN 809 W 100 N PAUL ID 83347 USA |                                     |             | 2. Registered Agent and Address (NO PO BOX)  DEAN NIELSEN 809 WEST 100 NORTH PAUL ID 83347  3. New Registered Agent Signature:* |          |            |                |
|--|--------------------------------|--|-------------------------------------|-------------|---|----------|------------|----------------|
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                                |  |                                     |             |   |          |            |                |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                                |  |                                     |             |   |          |            |                |
| 4. Corporations: Enter Na  | ames and Busin                 | ess Addresses of Presid  | dent, Secretary, and Directors. Tre | easurer (d  | optional).  |          |            |                |
| Office Held  | Name                           |  | Street or PO Address                |             | City  | State    | Country    | Postal Code    |
| PRESIDENT<br>SECRETARY   | ADAM D NIELSEN<br>DEAN NIELSEN |  | 781 W 100 N<br>809 W 100 N          |             | PAUL<br>PAUL  | ID<br>ID | USA<br>USA | 83347<br>83347 |
| 5. Organized Under the Laws of:  |                                | 6. Annual Report must be signed.*  |                                     |             |   |          |            |                |
| ID   |                                | Signature: Dean Nielsen  |                                     |             | Date: 01/17/2013  |          |            |                |
| C 138362   |                                | Name (type or print): Dean Nielsen   |                                     |             | Title: Secretary  |          |            |                |
| Processed 01/17/2013   |                                | * Electronically provide   | ed signatures are accepted as orig  | ginal signa | itures.   |          |            |                |