| No. W 2883 | Due no later than September 30, 2008 Annual Report Form | 2. Registered Agent and Office NO PO BOX |
|--|---|---|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address - Correct in this box. if applicable HOFFMAN FARMING LIMITED LIABILITY C ALAN HOFFMAN 1511 THORN CREEK RD MOSCOW, ID 83843 | ALAN HOFFMAN 1511 THORN CREEK RD MOSCOW, ID 83843 |
| NO FILING FEE IF RECEIVED BY DUE DATE | | New Registered Agent Signature |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. | | |
| Office held Name SUNEY Alex Hoffma | Street or P.O. Address City NOS 1511 Thorn Crack Fill Mos | State Zip Sour Id 33843 |
| e te de la companya d | | |
| 5. Organized Under the Laws of: WASHINGTON W 2883 | 6. Signature Alan Hoffman Name (Typed or Alan Hoffman | Date 8/7/08 owner Title mengen |
| Issued 07/01/2008 | Do Not Tape or Staple | 200809004345 |