No. W 125581		Due no later than May 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHAEL D CAVEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CAVEN-MCKAY FARMS LLC MICHAEL D CAVEN 1009 EAST VALLI-HI LANE EAGLE ID 83616		1009 EAST VALLI-HI LANE EAGLE 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	MICHAEL D	CAVEN	911 E WINDING CREEK SUITE 100	EAGLE	ID	USA	83616
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 125581		Signature: Michael Caven		Date: 04/20/2015			
		Name (type or print): Michael Caven		Title: Managing Member			
Processed 04/20/2015 * Electronically provided signatures are accepted as original signatures.							