No. W 35030 Return to:		Due no later than Dec 31, 2016 Annual Report Form			Registered Agent and Address (NO PO BOX) ALAN CAVENER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CAVENER FARMS L.L.C. JOLYNNE M CAVENER 2202 ESTATES DR NAMPA ID 83686		NAMPA ID	2202 ESTATES DR. NAMPA ID 83686 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compani	es: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JOLYNNE M	CAVENER	2202 ESTATES DR	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 35030		Signature: JOL		Date: 10/26/2016				
		Name (type or		Title: MANAGER				
Processed 10/26/2016	* Electronically provided signatures are accepted as original signatures.							